

Minutes of the meeting of the Finance Committee of the Board of Directors of the Cook County Health and Hospitals System held Friday, October 17, 2014 at the hour of 8:45 A.M., at 1900 W. Polk Street, in the Second Floor Conference Room, Chicago, Illinois.

I. Attendance/Call to Order

Chairman Butler called the meeting to order.

Present: Chairman Hon. Jerry Butler and Directors Ada Mary Gugenheim and Dorene P. Wiese, EdD (3)

Board Chairman M. Hill Hammock (ex-officio) and Directors Emilie N. Junge and Carmen Velasquez

Steven Scheer (non-Director Member)

Absent: None (0)

Additional attendees and/or presenters were:

Gina Besenhofer – System Director of Supply Chain Management	Randolph Johnston – Associate General Counsel
John Cookinham – System Chief Financial Officer	Terry Mason, MD – Cook County Department of Public Health
Claudia Fegan, MD - Claudia Fegan, MD – Executive Medical Director/Medical Director Stroger Hospital	Elizabeth Reidy –General Counsel
Steven Glass – Executive Director of Managed Care	Deborah Santana – Secretary to the Board
	John Jay Shannon, MD – Chief Executive Officer

II. Public Speakers

Chairman Butler asked the Secretary to call upon the registered public speakers.

The Secretary called upon the following registered public speaker:

1. Mr. George Blakemore Concerned Citizen

III. Action Items

A. Minutes of the Finance Committee Meeting, September 19, 2014

Director Wiese, seconded by Director Gugenheim, moved to accept the minutes of the Finance Committee Meeting of September 19, 2014. THE MOTION CARRIED UNANIMOUSLY.

B. Contracts and Procurement Items (Attachment #1)

Gina Besenhofer, System Director of Supply Chain Management, provided an overview of the requests presented for the Committee's consideration. The Committee reviewed and discussed the requests.

Ms. Besenhofer indicated that review of request numbers 6 through 19 by Contract Compliance has not yet been completed; she respectfully requested that the Committee conditionally approve these requests, pending the completion of the review by Contract Compliance.

III. Action Items

B. Contracts and Procurement Items (continued)

Board Chairman Hammock inquired as to the reason why all of the requests (with the exception of the grant-related items, which do not require review by Contract Compliance) were pending review by Contract Compliance. Ms. Besenhofer responded that Contract Compliance staff have received the contracts but have not been able to complete the work necessary to finalize their review; they are doing their best to complete this work as soon as possible. The Director of the Office of Contract Compliance has been trying to hire another person to handle the CCHHS contracts, but they have not yet been successful; she noted that they have been trying to recruit for that position for a year.

Dr. John Jay Shannon, Chief Executive Officer, provided additional information. The administration has had conversations with the Chairman of the County Board's Contract Compliance Committee as recently as this past month; concerns were expressed about the exact issues that have been raised today. Dr. Shannon stated that the Chairman of that Committee is highly motivated to get the position filled. The System will be funding the position, which will be located downtown in the Office of Contract Compliance; this person will work directly with the Director of the Office of Contract Compliance, and will work closely with Ms. Besenhofer. Part of the reason for the delay in filling the position is that, initially, it was determined that the salary for the position was too low; they are working to address that.

With regard to request number 1, information was provided to respond to a request made by Director Velasquez at the October 3rd Board Meeting; she had requested the list of partners that are part of the grant.

With regard to request number 3, Director Gugenheim noted that there is a media campaign referenced in the transmittal that is associated with the grant. She asked whether a contract relating to the media campaign will be brought back to the Board for approval, or whether approval for that is included in the acceptance of the grant. Ms. Besenhofer responded that a contract for the provision of those services will be a separate item coming back for approval by the Board.

Director Wiese, seconded by Director Gugenheim, moved the approval of request numbers 1 through 5. THE MOTION CARRIED UNANIMOUSLY.

Director Wiese, seconded by Director Gugenheim, moved the conditional approval of request number 6, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 7, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 8, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Note: Request number 8 was withdrawn from consideration at the October 31, 2014 Board Meeting, due to its pending status with regard to review by Contract Compliance.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 9, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

III. Action Items

B. Contracts and Procurement Items (continued)

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 10, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 11, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

With regard to request number 12, Ms. Besenhofer indicated that a correction to the term of the contract needs to be made. She stated that the term of the contract should be July 1, 2014 through September 31, 2017. Note: following the meeting, those dates were further revised to reflect the final corrected term of the proposed thirty-six (36) month contract, which is July 1, 2014 through June 30, 2017.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 12, as amended, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 13, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 14, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

With regard to request number 15, Director Gugenheim inquired whether the contract amount is based on actuarial data. Steven Glass, Executive Director of Managed Care, responded that the calculation is based on the membership at the rates that the State has under its contract with DentaQuest. Approximately \$87,000 of the \$3 million is directly paid to DentaQuest for administrative services, and the rest is used to reimburse the dental providers on a fee-for-service basis as they receive the claims.

In response to a question from Director Wiese regarding the scope of services, in terms of adult dental care, Mr. Glass stated that, in 2011, the State Legislature passed the Saving Medicaid Access and Resources Together (SMART) Act; included in that bill was a reduction or elimination of adult dental benefits for Medicaid beneficiaries. Through community advocacy and medical community efforts, it was demonstrated that, by not having that access, additional costs were being incurred and Medicaid beneficiaries were not as healthy because they could not get access to dental care. The reinstatement of services included dental cleanings, as well as some restorative services. He noted that the Medicaid benefits for dental are fairly limited. In the CountyCare Plan, they have added an additional benefit above and beyond what the State requires; if the State benefit allows for one (1) or two (2) annual cleanings, CountyCare allows for three (3) or four (4) annual cleanings. In response to a question from Director Wiese regarding how many people this estimate really covers, Mr. Glass stated that the estimate is based on the current CountyCare membership of approximately 100,000 members over the course of twelve (12) months.

III. Action Items

B. Contracts and Procurement Items (continued)

In response to Director Gugenheim's question regarding who assumes the risk under this arrangement, Mr. Glass responded that the Health Plan is at risk for the cost of the services. When Public Act 98-0651 was passed in July to restore dental services, there was an increase made to the PMPM to help offset these additional expenses. The administration has had to build this based on the State's history with DentaQuest, and through their experience with the Medicaid program. He stated that he will commit to provide updates to the Committee regarding what the spend is looking like and how it is moving.

Director Junge inquired regarding the relationship of these services to the work that the System's own dentists provide; she asked why the System is not hiring its own dentists to provide these services. Mr. Glass stated that, from the Health Plan side, staff have worked very closely with Dr. Jorelle Alexander, System Director of Oral Health, in identifying what the scope should look like and anticipating what the volume and utilization could look like. Dr. Claudia Fegan, Executive Medical Director/Medical Director Stroger Hospital, stated that the administration is hiring more dentists and there are plans for expansion; however, there is no way that the System can ramp up at the rate that is needed. The administration is looking to fill positions; there is a plan for a systematic approach as to how the System's dental services will be expanded and more accessible.

Board Chairman Hammock stated that very sophisticated models will need to be developed to understand utilization and to be able to forecast and predict that sort of cost, with error factors. He referenced the subject of the dashboard that will be developed; he stated that once the dashboard is developed, the Board will be able to really monitor this.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 15, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 16, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 17, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 18, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

Director Gugenheim, seconded by Director Wiese, moved the conditional approval of request number 19, pending completion of review by Contract Compliance. THE MOTION CARRIED UNANIMOUSLY.

C. Any items listed under Sections III and IV

IV. Recommendations, Discussion/Information Items

A. Update on CountyCare Health Plan (Attachment #2)

Mr. Glass reviewed the information contained in the Update on the CountyCare Health Plan. The Committee reviewed and discussed the information.

Mr. Glass informed the Committee that membership dropped significantly from the end of August to the end of September; he stated that membership is down approximately 6% from the beginning of July, which was the start of the Health Plan. Once a year, Medicaid beneficiaries must complete a redetermination process with the State of Illinois in order to retain their benefits. The 8,000 member decrease is related primarily to a lack of redetermination of CountyCare members; approximately 6,700 members were lost because those members did not complete the redetermination process on time. The administration is making very aggressive efforts to reach out to the members and the provider community, to make sure they are aware of this, and get as much information into their hands to hopefully reduce that number moving forward. He added that, through staff efforts, they have been able to connect about 2,400 members directly to the Illinois Medicaid Redetermination Project's hotline, in order to get their paperwork completed.

Mr. Glass stated that there is also a technical glitch in the State's system relating to CountyCare. Part of the redetermination process allows for individuals to be returned back to the health plan that they had, prior to the redetermination process. Because CountyCare was technically built as a waiver, there is no health plan to which its members can return. To fix this issue, the State is in the process of doing is a mass conversion of all of the CountyCare members from waiver status to health plan status, so some of that loss can be avoided. Representatives from the State have also agreed that they will not cancel coverage for CountyCare members until they fix that technical error, starting with the December enrollment.

Additionally, Mr. Glass stated that the State has reported to all of the health plans that the response to the mailings for the movement into managed care has been so significant on their call center that they are going to be extending the mailing process and the mailing timeline they have published; this includes those mailings going to CountyCare members who were originally scheduled to have this take place in January. From a positive perspective, this means that current members will not be asked to select a different health plan until a later time; however, the delay means that the new members that the administration expected to receive will be slower to come in.

With regard to the information on slide 7, regarding claims by cost category, Director Gugenheim commented that it would be interesting to compare these amounts with either an actual patient count or an encounter. Mr. Glass responded that this is something he can do. Mr. Scheer asked whether the claims by cost category can be broken out between CCHHS and contracted providers. Mr. Glass responded in the affirmative¹.

Director Gugenheim, seconded by Director Wiese, moved to receive and file the Update on the CountyCare Health Plan. THE MOTION CARRIED UNANIMOUSLY.

V. Report from System Director of Supply Chain Management

A. Report of emergency purchases

There were no emergency purchases to report at this time.

VI. Report from Chief Financial Officer (Attachment #3)

A. Financial Reports through August 2014 (Attachment #4)

John Cookinham, System Chief Financial Officer, reviewed the information presented in his update on financial matters. The Committee reviewed and discussed the information.

Mr. Cookinham stated that the System receives a Benefits Improvement and Protection Act of 2000 (BIPA) payment that is not related to patient activity twice per year. In August, the System received \$93.7 million for that; therefore, the August patient service revenue was larger than the year-to-date average. On a go-forward basis, that revenue will be accrued every month even though it is only received twice a year, to level out that fluctuation.

Director Gugenheim, seconded by Director Wiese, moved to receive and file the Report from the Chief Financial Officer and the Financial Reports through August 2014. THE MOTION CARRIED UNANIMOUSLY.

VII. Adjourn

As the agenda was exhausted, Chairman Butler declared the meeting ADJOURNED.

Respectfully submitted,
Finance Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXX
Hon. Jerry Butler, Chairman

Attest:

XXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

¹ Follow-up: With regard to the CountyCare Health Plan update, a request was made for a comparison of the claims by cost category amounts with either an actual patient count or an encounter. Additionally, a request was made for the claims by cost category to be broken out between CCHHS and contracted providers. Page 5.

Cook County Health and Hospitals System
Finance Committee Meeting Minutes
October 17, 2014

ATTACHMENT #1

COOK COUNTY HEALTH AND HOSPITALS SYSTEM

ITEM III.B.

OCTOBER 17, 2014 FINANCE COMMITTEE MEETING

CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor	Service or Product	Fiscal impact not to exceed:	Affiliate / System	Begins on Page #
Accept Grant Award					
1	U.S. Department of Health and Human Services, Centers for Disease Control and Prevention	Service - Partnerships to Improve Community Health Program	Grant award amount \$2,480,807.00	CCDPH	3
Accept Grant Renewals					
2	Illinois Department of Public Health	Service - Bioterrorism Preparedness and Response Program	Grant renewal amount: \$1,213,704.00	CCDPH	4
3	Illinois Department of Public Health	Service - Illinois Tobacco-Free Communities Program	Grant renewal amount: \$938,732.00	CCDPH	5
4	Illinois Department of Public Health	Service - Cities Readiness Initiative Program	Grant renewal amount: \$169,331.00	CCDPH	6
5	Great Lakes Hemophilia Foundation	Service - hemophilia services coordination at Stroger Hospital	Grant renewal amount: \$15,226.00	SHCC	7
Increase Contract					
6	Professional Dynamic Network (PDN)	Service - contracted medical records coding staffing	\$520,000.00	System	8
Extend and Increase Contracts					
7	Owens and Minor	Product - medical and surgical supplies	\$7,500,000.00	System	9
8	Nebo Systems, Inc.	Service - outpatient claims edit resolution services	\$880,000.00	System	10
9	Guy Brown	Product - office supplies and copy paper	\$240,000.00	System	11
10	Standard Register Company	Product and Service - System-wide forms, labels and document printing management	\$200,000.00	SHCC	12
11	Alcon Laboratories	Product - ophthalmology surgical supplies	\$87,000.00	SHCC	13

COOK COUNTY HEALTH AND HOSPITALS SYSTEM
ITEM III.B.
OCTOBER 17, 2014 FINANCE COMMITTEE MEETING
CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor	Service or Product	Fiscal impact not to exceed:	Affiliate / System	Begins on Page #
Execute Contracts					
12	Rush University Medical Center	Service - authorization to execute a Clinical Services Exhibit to Part IV, Clinical Services, of the Master Agreement with Rush University Medical Center	\$23,854,764.00	SHCC	14
13	Masimo Americas, Inc.	Product - equipment, software and consumable sensors	\$4,500,000.00	SHCC	15
14	Abbott Diabetes Care Sales Corporation	Product and Service - blood glucose monitors for glucose testing	\$3,507,241.00	System	16
15	DentaQuest of Illinois, LLC	Service - dental benefits management	\$3,000,000.00	Managed Care	17
16	Boston Scientific Corporation	Product - surgical supplies for Urology	\$1,013,000.00	SHCC	18
17	Diagnostica Stago	Product - equipment, reagents, consumables and control for coagulation testing	\$1,011,344.00	PHCC, SHCC	19
18	Tallgrass Systems, Ltd.	Product - toner cartridges for Lexmark printers	\$650,000.00	System	20
19	Medidal, Inc.	Service - pharmacy prescription claims processing services	\$500,000.00	System	21

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, Chief Operating Officer, Cook County Department of Public Health	
DATE: 10/02/2014		PRODUCT / SERVICE: Service – Partnerships to Improve Community Health Program	
TYPE OF REQUEST: Grant Contract Acceptance		VENDOR / SUPPLIER: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Atlanta, GA	
FISCAL IMPACT: *		GRANT FUNDED AMOUNT: \$2,480,807.00	
CONTRACT PERIOD: 09/30/2014 thru 09/29/2015		CONTRACT NUMBER: 1U58DP005869-01	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

There is no prior contract history.

NEW PROPOSAL JUSTIFICATION:

This grant seeks to expand implementations of interventions leading to community improvements that reduce chronic disease with a priority focus on areas of high need to address increasing health and social inequities in suburban Cook County. This is the first year of a three-year federally funded project. This program is not mandated. The requested grant funded amount is \$2,480,807.00.

*The cost of the early termination of this grant is \$ 0.00.

TERMS OF REQUEST:

This is a request to accept grant contract number 1U58DP005869-01 in an amount not to exceed \$2,480,807.00, as needed, for a period of twelve (12) months from 09/30/2014 thru 09/29/2015.

CCHHS CFO:

John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 9 1 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

1

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M.
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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, Chief Operating Officer, Cook County Department of Public Health	
DATE: 09/22/2014		PRODUCT / SERVICE: Service – Bioterrorism Preparedness and Response Program	
TYPE OF REQUEST: Grant Contract Renewal		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
FISCAL IMPACT: *		GRANT FUNDED AMOUNT: \$1,213,704.00	
CONTRACT PERIOD: 07/01/2014 thru 06/30/2015		CONTRACT NUMBER: 57180016C	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

The previous Grant Agreement with the Illinois Department of Public Health was for twelve (12) months from 07/01/2013 thru 06/30/2014 in the amount of \$1,129,626.00. The IDPH Bioterrorism Preparedness and Response Grant was approved by the Cook County Health and Hospitals System Board on August 23, 2013.

NEW PROPOSAL JUSTIFICATION:

As a state certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) is mandated to provide public health emergency preparedness and response to include hazard vulnerability risk assessment, third year deliverables, self-assessment of emergency capabilities, and formulation of an annual work plan for the next program year. The requested grant funded amount is \$1,213,704.00.

*The cost of the early termination of this grant is \$352,852.00.

TERMS OF REQUEST:

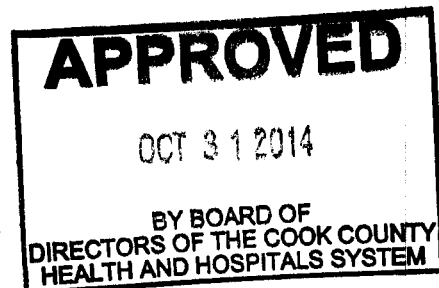
This is a request to renew grant contract number 57180016C in an amount not to exceed \$1,213,704.00 for a period of twelve (12) months from 07/01/2014 thru 06/30/2015.

CCHHS CFO:

John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon, M.D., Chief Executive Officer



Request #

2

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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, Chief Operating Officer, Cook County Department of Public Health	
DATE: 09/12/2014		PRODUCT / SERVICE: Service – Illinois Tobacco-Free Communities Program	
TYPE OF REQUEST: Grant Contract Renewal		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
FISCAL IMPACT: *		GRANT FUNDED AMOUNT: \$938,732.00	
CONTRACT PERIOD: 07/01/2014 thru 06/30/2015		CONTRACT NUMBER: 53281017C	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

The previous Grant Agreement with the Illinois Department of Public Health was for twelve (12) months from 07/01/2013 thru 06/30/2014 in the amount of \$978,732.00. The IDPH Illinois Tobacco-Free Communities Grant was approved by the Cook County Health and Hospitals System Board on October 25, 2013.

NEW PROPOSAL JUSTIFICATION:

This grant provides for a tobacco reduction program among youth and adults. CCDPH will continue to enforce the Smoke-Free Illinois Act through local law enforcement, promote the Illinois Tobacco Quitline, and conduct a media campaign targeting high-risk populations in suburban Cook County. This program is not mandated.

*The cost of the early termination of this grant is \$189,208.00.

TERMS OF REQUEST:

This is a request to renew grant contract number 53281017C in an amount not to exceed \$938,732.00 for a period of twelve (12) months from 07/01/2014 thru 06/30/2015.

CCHHS CFO:

John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 31 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

3

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, Chief Operating Officer, Cook County Department of Public Health	
DATE: 09/24/2014		PRODUCT / SERVICE: Service – Cities Readiness Initiative Program	
TYPE OF REQUEST: Grant Contract Renewal		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
FISCAL IMPACT: *		GRANT FUNDED AMOUNT: \$169,331.00	
CONTRACT PERIOD: 07/01/2014 thru 06/30/2015		CONTRACT NUMBER 57180099C	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

The previous Grant Agreement with the Illinois Department of Public Health was for twelve (12) months from 07/01/2013 thru 06/30/2014 in the amount of \$153,878.00. The IDPH Cities Readiness Initiative Grant was approved by the Cook County Health and Hospitals System Board on August 23, 2013.

NEW PROPOSAL JUSTIFICATION:

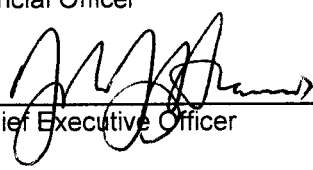
As a state certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) is mandated to provide support activities to assist suburban Cook County communities in planning and exercises for public health incidents/emergencies. The requested grant funded amount is \$169,331.00.

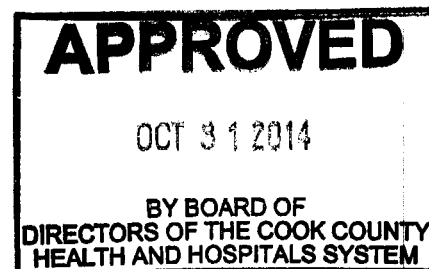
*The cost of the early termination of this grant is \$54,540.00.

TERMS OF REQUEST:

This is a request to renew grant contract number 57180099C in an amount not to exceed \$169,331.00, as needed, for a period of twelve (12) months from 07/01/2014 thru 06/30/2015.

CCHHS CFO: 
John Cookinham, Chief Financial Officer

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #

4

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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Debra Carey, Chief Operating Officer Outpatient Services <i>Debra S. Carey</i>	
DATE: 09/12/2014		PRODUCT / SERVICE: Service – Hemophilia Services Coordination at Stroger Hospital	
TYPE OF REQUEST: Grant Contract Renewal		VENDOR / SUPPLIER: Great Lakes Hemophilia Foundation, Milwaukee, WI	
FISCAL IMPACT: *		GRANT FUNDED AMOUNT: \$15,226.00	
CONTRACT PERIOD: 06/01/2014 thru 05/31/2015		CONTRACT NUMBER: H30MC24052	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

The previous contract with the Great Lakes Hemophilia Foundation was for twelve (12) months in the amount of \$15,226.00 approved by the Cook County Health and Hospitals System on October 25, 2013.

NEW PROPOSAL JUSTIFICATION:

This program provides for the coordination of services for clients with congenital bleeding disorders at Stroger Hospital. This program is not mandated. The grant funded amount is \$15,226.00.

*The cost of the early termination of this grant is \$0.00.

TERMS OF REQUEST:

This is a request to renew grant contract number H30MC24052 in an amount not to exceed \$15,226.00 for a period of twelve (12) months from 06/01/2014 thru 05/31/2015.

CCHHS CFO:

John Cookinham
John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 31 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

5

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
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Rothstein CORE Center •

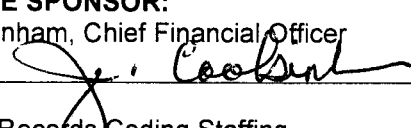
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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Natasha Lafayette-Jones, System Director Health Information Mgmt.		EXECUTIVE SPONSOR: John Cookinham, Chief Financial Officer 	
DATE: 10/04/2014	PRODUCT / SERVICE: Service - Contracted Medical Records Coding Staffing		
TYPE OF REQUEST: Increase Contract	VENDOR / SUPPLIER: Professional Dynamic Network (PDN), Olympia Fields, IL		
ACCOUNT: 890-260	FISCAL IMPACT NOT TO EXCEED: \$520,000.00	GRANT AWARD / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 12/01/2012 thru 11/30/2015		CONTRACT NUMBER: H12-25-083	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY: N/A		

PRIOR CONTRACT HISTORY:

Contract number H10-25-0094 was approved by the Cook County Health and Hospitals System Board on 07/29/2010 in the amount of \$54,000.00 for a period of 18 months from 07/27/2010 thru 11/26/2011. PDN had held previous contracts for such services during FY 2000 through FY 2009. This vendor was contracted to provide additional assistance for coding patient records in an effort to increase the cash flow and to address the growing amount of patients discharged but not final billed. Contract number H12-25-083 was approved by the CCHHS Board on 11/29/2012 for the period from 12/01/2012 through 11/30/2015 in the amount of \$1,000,000.00.

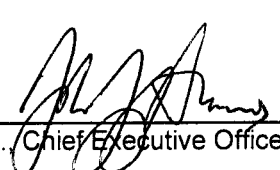
NEW PROPOSAL JUSTIFICATION:

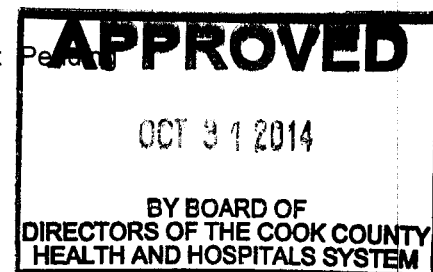
This request is to increase the fiscal amount for Professional Dynamic Network. PDN provides staffing to complete coding and maintain compliance of medical records with respect to the timely filing of requirements. We continue to recruit staff for the medical records department, but it has been more challenging to find qualified staff than anticipated. These services are critical to continue to keep the CCHHS billing more current.

TERMS OF REQUEST:

This request is to increase contract number H12-25-083 in an amount not to exceed \$520,000.00, as needed, for the remainder of the contract period from 12/01/2012 thru 11/30/2015.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #

6

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BOARD APPROVAL REQUEST

SPONSOR: Regina M. Besenhofer, System Director, Supply Chain Management		EXECUTIVE SPONSOR:	
DATE: 10/04/2014	PRODUCT / SERVICE: Product- Medical & Surgical Supplies		
TYPE OF REQUEST: Extend and Increase Contract	VENDOR / SUPPLIER: Owens and Minor, Mechanicsville, VA		
ACCOUNT: 890-360		FISCAL IMPACT NOT TO EXCEED: \$7,500,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A
ORIGINAL CONTRACT PERIOD 07/01/2011 thru 08/16/2014		REVISED CONTRACT PERIOD 08/17/2014 thru 01/31/2015	CONTRACT NUMBER: H11-25-047
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospitals System (CCHHS) Board on 06/24/2011 approved a contract in the amount of \$60,000,000.00 for the period from 07/01/2011 through 08/16/2014 for this vendor to become the primary distributor of the medical/surgical supplies for CCHHS. The selection of Owens & Minor through the RFP process was based on pricing and service level commitment. A request to increase the amount of the contract was approved by the CCHHS Board on 06/27/2014 in the amount of \$4,500,000.00.

NEW PROPOSAL JUSTIFICATION:


This request is to increase the contract with Owens and Minor for the distribution of medical/surgical supplies for CCHHS. As a part of the competitive procurement process an RFP was posted for the Medical/Surgical distribution, Lab distribution and Pharmacy distribution. We are in the process of evaluating the responses to this RFP and will have a recommended plan in the next thirty (30) days. As we have not yet come to a conclusion the additional time and money requested is to allow time for transition if the awarded proposer is different from our current supplier.

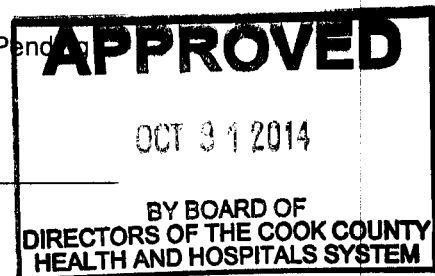
TERMS OF REQUEST:

This is a request to extend and increase contract number H11-25-047 in an amount not to exceed \$7,500,000.00, as needed, for the revised contract period 08/17/2014 thru 01/31/2015.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: 
John Cookinham, Chief Financial Officer

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #

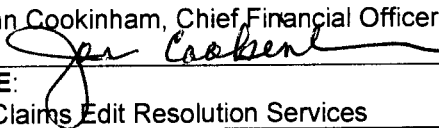
7

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BOARD APPROVAL REQUEST

SPONSOR: Steven Kulhanek, System Manager Revenue Cycle		EXECUTIVE SPONSOR: John Cookinham, Chief Financial Officer 	
DATE: 10/04/2014	PRODUCT / SERVICE: Service – Outpatient Claims Edit Resolution Services		
TYPE OF REQUEST: Extend and Increase Contract	VENDOR / SUPPLIER: Nebo System, Inc, Oak Brook Terrace, IL		
ACCOUNT: FISCAL IMPACT NOT TO EXCEED: 890-260 \$880,000.00		GRANT FUNDED / RENEWAL AMOUNT: N/A	
ORIGINAL CONTRACT PERIOD: 07/01/011 thru 06/30/2014		REVISED CONTRACT PERIOD 07/01/2014 thru 01/31/2015	CONTRACT NUMBER: H11-25-056
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospitals System (CCHHS) Board of Directors approved this contract on 06/24/2011 in the amount of \$3,278,000.00 for the period from 07/01/011 thru 06/30/2014. It provides outpatient claims edit resolution services on accounts that in a "hold pending" status within the CCHHS claims submission platform.

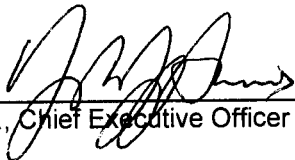
NEW PROPOSAL JUSTIFICATION:

This request will continue to provide software to import daily files, run claims through an eligibility function and create reports for review. Edits are reviewed to identify situations that require additional research prior to the submission of the claim. Listings of accounts can be provided and accounts updated in the CCHHS information system with comments, activity codes and payer information.

TERMS OF REQUEST:

This is a request to extend and increase contract number H11-25-056 in an amount not to exceed \$880,000.00, as needed, for a period of five (5) months from 07/01/2014 thru 01/31/2015.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer

WITHDRAWN

Request #
8

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BOARD APPROVAL REQUEST

SPONSOR: Regina M. Besenhofer, System Director, Supply Chain Management		EXECUTIVE SPONSOR:	
DATE: 10/01/2014		PRODUCT / SERVICE: Product – Office Supplies and Copy Paper	
TYPE OF REQUEST: Extend and Increase Contract		VENDOR / SUPPLIER: Guy Brown, Chicago IL	
ACCOUNT: FISCAL IMPACT NOT TO EXCEED: 890-350 \$240,000.00		GRANT FUNDED / RENEWAL AMOUNT: N/A	
ORIGINAL CONTRACT PERIOD: 10/01/2010 thru 08/31/2014		REVISED CONTRACT PERIOD: 10/01/2014 thru 12/31/2014	
CONTRACT NUMBER: H10-25-131			
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

This contract was approved by the Cook County Health and Hospitals System (CCHHS) Board of Directors on 9/30/2010 for the period from 10/01/2010 thru 09/30/2013 in the amount of \$3,604,000.00, inclusive of \$360,000.00 that was grant funded. Amendments were executed by SCM effective 10/01/2013 to extend the contract term to 03/31/2014. An amendment was executed by SCM for extension and increase until 08/31/2014 in an amount of \$149,000.00.

NEW PROPOSAL JUSTIFICATION:

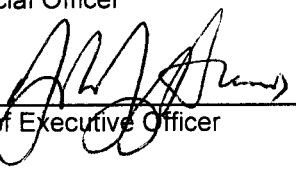
This request is to extend and increase the current contract. There is an RFP currently posted and we will be going through the competitive procurement process to identify the most qualified vendor that can meet the needs of CCHHS. There will be internal process changes such as copy paper becoming an inventory item so as to manage, monitor and control utilization of product. Included in the RFP are requirements to include vendor desktop delivery, development of a formulary for approved items only, and electronic access to order with escalation for approval/denial of non-formulary items.

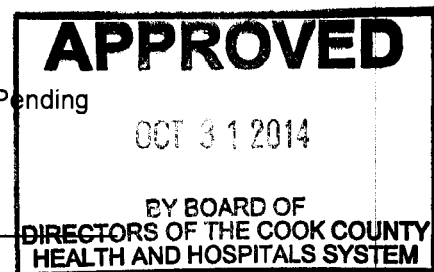
TERMS OF REQUEST:

This is a request to extend and increase contract number H10-25-131 in an amount not to exceed \$ 240,000.00, as needed, for a period of three (3) months from 10/01/2014 thru 12/31/2014.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: 
John Cookinham, Chief Financial Officer

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #

9

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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Regina M. Besenhofer, System Director Supply Chain Management		EXECUTIVE SPONSOR:
DATE: 10/02/2014	PRODUCT / SERVICE: Product/Service- System Wide Forms, Labels and Document Printing Management	
TYPE OF REQUEST: Extend and Increase Contract	VENDOR / SUPPLIER: Standard Register Company, Dayton, OH	
ACCOUNT: 897-355	FISCAL IMPACT NOT TO EXCEED: \$200,000.00	GRANT FUNDED / RENEWAL AMOUNT: N/A
ORIGINAL CONTRACT PERIOD: 07/01/2011 thru 06/30/2014	REVISED CONTRACT PERIOD: 11/01/2014 thru 12/31/2014	CONTRACT NUMBER: H11-72-053
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO	
	NON-COMPETITIVE SELECTION METHODOLOGY: N/A	

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospitals System (CCHHS) Board of Directors approved contract number H11-72-053 in the amount of \$1,318,833.00 on 06/24/2011 for the period from 07/01/2011 through 06/30/2014. The contract was increased by the CCHHS Board on 01/24/2014 in the amount of \$600,000.00. Under the authority of SCM, an amendment to increase and extend the contract was executed for the time period of 07/01/2014 through 10/31/2014 in the amount of \$149,000.

NEW PROPOSAL JUSTIFICATION:

This request is to extend and increase the contract for the printing of forms, labels and document management. An RFP is currently posted and we will be going through the competitive procurement process to identify the most qualified vendor that can meet the current needs of all CCHHS facilities. Additional time is required in order to completely assess all requirements as we migrate from printed clinical forms to electronic formats utilizing the current Electronic Medical Record technology and better forms management.

TERMS OF REQUEST:

This request is to extend and increase contract number H11-72-053 in an amount not to exceed \$200,000.00, as needed, for a period of two (2) months from 11/01/2014 through 12/31/2014.

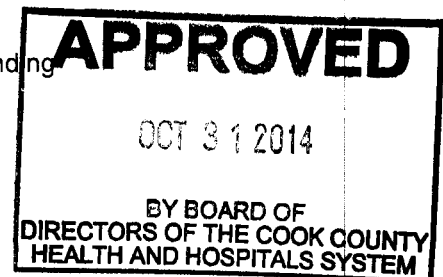
CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO:

John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon M.D., Chief Executive Officer



Request #
10

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Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Thomas Patrianakos, M.D., Division Chairman, Department of Ophthalmology		EXECUTIVE SPONSOR: Claudia M. Fegan, M.D., Executive Medical Director <i>Cmf</i>	
DATE: 10/04/2014		PRODUCT / SERVICE: Product – Ophthalmology Surgical Supplies	
TYPE OF REQUEST: Extend and Increase Contract		VENDOR / SUPPLIER: Alcon Laboratories, Dallas, TX	
ACCOUNT: 897-362		FISCAL IMPACT NOT TO EXCEED: \$87,000.00	GRANT FUNDED / RENEWAL AMOUNT: N/A
ORIGINAL CONTRACT PERIOD: 06/14/2012 thru 09/30/2014		REVISED CONTRACT PERIOD: 10/01/2014 thru 12/31/2014	
CONTRACT NUMBER: H11-73-0059			
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source			

PRIOR CONTRACT HISTORY:

This contract was approved by the Supply Chain Management Department on 06/19/2012 in the amount of \$90,000.00 for a period of twenty-four (24) months from 06/14/2012 thru 06/13/2014 for the vendor to provide posterior and anterior (intraocular) chamber lenses. The term of the contract was extended until 09/30/2014 and an increase in the amount of \$59,000.00 was effective on 06/08/2014.

NEW PROPOSAL JUSTIFICATION:

This request will allow the vendor to continue to provide the intraocular lenses needed by the ophthalmology surgeons treating patients for cataracts and myopia. In addition, there is an anticipated 20% increase in patient volume due to adding Vitrectomy's at Provident. An RFP is currently being worked on to address all of the Ophthalmology Departments current and future needs as they grow their program.

TERMS OF REQUEST:

This is a request to extend and increase contract number H11-73-0059 in an amount not to exceed \$87,000.00 as needed, for a period of three (3) months from 10/01/2014 thru 12/31/2014.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: *John Cookinham*
John Cookinham, Chief Financial Officer

CCHHS CEO: *John Jay Shannon*
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 31 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

11

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Revised 03/01/2011

Cook County Health & Hospitals System

AS AMENDED BOARD APPROVAL REQUEST

SPONSOR: John O'Brien, Director of Professional Education		EXECUTIVE SPONSOR: Claudia M. Fegan, Executive Medical Director/Chief Medical Officer <i>Cmf</i>	
DATE: 09/04/2014	PRODUCT / SERVICE: Service – Authorization to execute a Clinical Services Exhibit to Part IV, Clinical Services, of the Master Agreement with Rush University Medical Center.		
TYPE OF REQUEST: Execute Contract	VENDOR / SUPPLIER: Rush University Medical Center, Chicago, IL		
ACCOUNT: 897-272	FISCAL IMPACT NOT TO EXCEED: \$23,854,764.00	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 10/01/2014 thru 09/30/2017 07/01/2014 thru 06/30/2017		CONTRACT NUMBER: H14-25-059	
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source			

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospitals System (CCHHS) Board of Directors approved an educational agreement on 06/27/2013 in the amount of \$10,079,156.00 for Rush University Medical Center to provide physician services as required by the County.

NEW PROPOSAL JUSTIFICATION:

This request is to add exhibits A-R to provide physician services in specific departments throughout CCHHS. Each physician and other licensed employees will provide patient care, perform procedures and develop collaborative partnerships and initiatives. They will also provide test interpretation; promote research initiatives and clinical trial opportunities, various administrative duties as required and education of medical students, residents and fellows. Each exhibit defines the statement of work, key performance indicators and metrics for measuring the key performance indicators.

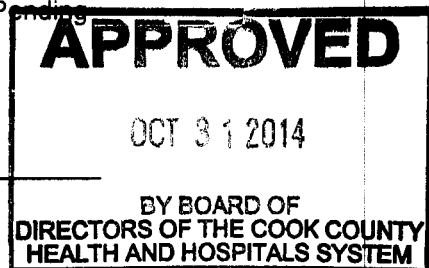
TERMS OF REQUEST:

This is a request to execute contract number H14-25-059 in an amount not to exceed \$23,854,764.00, as needed, for a period of thirty-six (36) months from ~~10/01/2014 thru 09/30/2017~~ **07/01/2014 thru 06/30/2017**

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE? *Pending*

CCHHS CFO: *John Cookinham*
John Cookinham, Chief Financial Officer

CCHHS CEO: *John Jay Shannon*
John Jay Shannon, M.D, Chief Executive Officer



Request #
12

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COOK COUNTY HEALTH & HOSPITALS SYSTEM

Toni Preckwinkle
President
Cook County Board of Commissioners
John Jay Shannon, MD
Chief Executive Officer
Cook County Health & Hospitals System



COOK COUNTY HEALTH
& HOSPITALS SYSTEM
CCHHS

Cook County Health & Hospitals System
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Commissioner Jerry Butler • Vice Chairman
Lewis Collens
Ric Estrada
Ada Mary Gugenheim
Emilie N. Junge
Wayne M. Lerner, DPH, FACHE
Carmen Velasquez
Dorene P. Wiese, EdD

October 17, 2014

To: Deborah Santana, Secretary to the Board
Cook County Health and Hospitals System

From: Gina Besenhofer, System Director, Supply Chain Management
Cook County Health and Hospitals System

Re: Correction Memo
Rush University Medical Center
H14-25-059

The Board Approval Request for the above named service will be presented to the Board of Directors of Cook County Health and Hospitals System for approval on October 3, 2014. Corrections are necessary to the **CONTRACT PERIOD** and the **TERMS OF REQUEST** for the above named vendor. It should be:

CONTRACT PERIOD:
07/01/2014 thru 06/30/2017

TERMS OF REQUEST

This is a request to execute contract number H14-25-059 in an amount not to exceed \$24,158,352.00, as needed, for a period of thirty-six (36) months from **07/01/2014 thru 06/30/2017**.

If additional information is needed, please feel free to contact me.

Thank you.

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Regina M. Besenhofer, System Director Supply Chain Management		EXECUTIVE SPONSOR:	
DATE: 10/02/2014		PRODUCT / SERVICE: Product - Equipment, Software and Consumable Sensors	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Masimo Americas, Inc., Irvine, CA	
ACCOUNT: 897-362		FISCAL IMPACT NOT TO EXCEED: \$4,500,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A
CONTRACT PERIOD: 11/01/2014 thru 10/31/2017		CONTRACT NUMBER: H14-25-086	
COMPETITIVE SELECTION METHODOLOGY: X GPO			
NON-COMPETITIVE SELECTION METHODOLOGY:			

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospital System has no prior contract history with Masimo Americas, Inc.

NEW PROPOSAL JUSTIFICATION:

This request is to execute a contract with Masimo Americas, Inc. to provide pulse oximeters, equipment maintenance and sensors to non-invasively monitor the oxygen saturation (SpO2) of our patient's arterial hemoglobin by measuring absorbency changes of red and infrared light resulting from arterial blood flow pulsation.

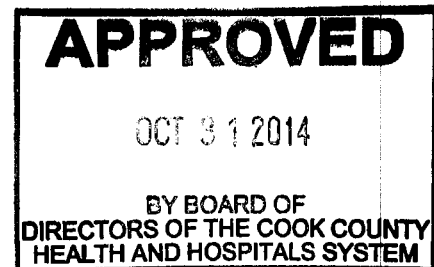
TERMS OF REQUEST:

This is a request to execute contract number H14-25-086 in an amount not to exceed \$4,500,000.00, as needed, for a period of thirty-six (36) months from 11/01/2014 thru 10/31/2017.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: John Cookinham
John Cookinham, Chief Financial Officer

CCHHS CEO: John Jay Shannon
John Jay Shannon, M.D., Chief Executive Officer



Request #
13

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Revised 03/01/2011

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Joanne Dulski, Director of Pathology CaTanya Norwood, Interim Director of Pharmacy		EXECUTIVE SPONSOR: Peter Daniels, Chief Operating Officer, Hospital Based Services	
DATE: 09/04/2014		PRODUCT / SERVICE: Product and Service- Blood Glucose Monitors for Glucose Testing	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Abbott Diabetes Care Sales Corporation, Abbott Park, IL	
ACCOUNT:		GRANT FUNDED /RENEWAL AMOUNT:	
890-361 Inpatient \$ 776,741.00		N/A	
890-365 Outpatient 2,740,500.00			
Total \$3,507,241.00			
CONTRACT PERIOD: 11/01/2014 thru 10/31/2017		CONTRACT NUMBER: H14-25-091	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:
Contract 07-15-180H was approved by the Cook County Board on 06/05/2007 in the amount of \$864,000.00 for a thirty six (36) month period from 06/07/2007 through 05/31/2010. This contract was to provide blood glucose monitors, consumables and supplies for inpatient testing at John H. Stroger Jr. Hospital, Provident Hospital, Oak Forest Hospital, Cermak Health Services and the external clinics. The contract was extended in time only from 06/01/2010 through 11/30/2010. The contract was amended to extend and increase for the time period of 12/01/2011 thru 7/31/2012 in the amount of \$86,400.00. The contract was subsequently extended from 08/01/2012 thru 05/31/2013 with no increase in cost to the contract. An increase and extend to the contract was approved by the CCHHS Board on 05/31/2013 for the time period of 06/01/2013 through 8/31/2013. The contract was extended in time only from 09/01/2013 through 10/31/2014.

NEW PROPOSAL JUSTIFICATION:
This contract will allow CCHHS the best and most cost effective methodology to meet regulatory and accreditation guidelines. In addition, inpatient and outpatient volumes have been combined under the inpatient contract. This includes glucose meters, docking stations and LIS interface.

TERMS OF REQUEST:
This request is to execute number H14-25-091 in an amount not to exceed \$3,507,241.00 for a period of thirty-six (36) months from 11/01/2014 thru 10/31/2017.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: John Cookinham
John Cookinham, Chief Financial Officer

CCHHS CEO: John Jay Shannon
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 9 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

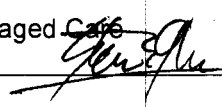
Request #
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BOARD APPROVAL REQUEST

SPONSOR: Tina Barksdale, Manager of Provider Relations, CountyCare		EXECUTIVE SPONSOR: Steven Glass, Executive Director, Managed Care 	
DATE: 10/03/2014		PRODUCT / SERVICE: Service - Dental Benefits Management	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: DentaQuest of Illinois, LLC, Boston MA	
ACCOUNT: 896-362		FISCAL IMPACT NOT TO EXCEED: \$3,000,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A
CONTRACT PERIOD: 11/1/2014 thru 10/31/2015		CONTRACT NUMBER: H14-25-089	
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source/Comparable Government Procurement			

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospital System has no prior contract history with DentaQuest of Illinois, LLC.

NEW PROPOSAL JUSTIFICATION:

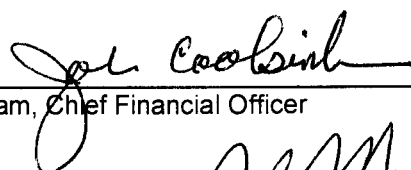
Effective July 1, 2014, Public Act 98-0651 restored Medicaid adult dental benefits to 2011 levels. As a result, CountyCare must provide an expanded scope of benefits to its members. This contract will provide dental benefits management for all CountyCare members through a PMPM payment agreement. This includes contracting and maintenance of a dental provider network, as well as processing of dental claims. DentaQuest is the vendor currently used by the State of Illinois, selected through a competitive method, for the same services sought by the CCHHS.

TERMS OF REQUEST:

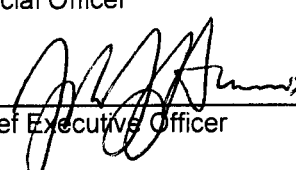
This is a request to execute contract number H14-25-089 in an amount not to exceed \$3,000,000.00, as needed, for twelve (12) months from 11/1/2014 thru 10/31/2015.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE? Pending

CCHHS CFO:


John Cookinham, Chief Financial Officer

CCHHS CEO:


John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 31 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #
15

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Revised 03/01/2011

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Tanda Russell, Director of Perioperative Services		EXECUTIVE SPONSOR: Peter Daniels, Chief Operating Officer, Hospital Based Services <i>P. Daniels</i>	
DATE: 10/01/2014		PRODUCT / SERVICE: Product - Surgical Supplies for Urology	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Boston Scientific Corporation, Boston, MA	
ACCOUNT: 897-362		FISCAL IMPACT NOT TO EXCEED: \$1,013,000.00	GRANT FUNDED /RENEWAL AMOUNT:
CONTRACT PERIOD: 07/01/2014 thru 09/30/2016		CONTRACT NUMBER: H14-25-014	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

This contract provides for urological supplies for the Department of Surgery. The prior contract was approved by Cook County Health and Hospitals System (CCHHS) Board of Directors on 05/31/2012 in the amount of \$797,366.00 for a period from 05/01/2012 thru 06/30/2014.

NEW PROPOSAL JUSTIFICATION:

This request is to enter into a new contract with Boston Scientific. CCHHS provides specialty urological services to a large volume of Cook County patients. The specialty items used by the surgical team provide quality care and outcomes for our patients that require surgical interventions.

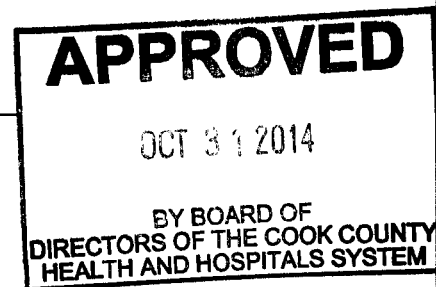
TERMS OF REQUEST:

This is a request to execute contract number H14-25-014 in an amount not to exceed \$1,013,000.00, as needed, for a period of twenty-seven (27) months from 07/01/2014 thru 09/30/2016.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: *John Cookinham*
John Cookinham, Chief Financial Officer

CCHHS CCI/CSS: *John Jay Shannon*
John Jay Shannon, M.D., Chief Executive Officer



Request #
16

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M. Rothstein CORE Center •

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Joanne Marcichow-Dulski Laboratory Director, CCHHS		EXECUTIVE SPONSOR: Peter Daniels, Chief Operating Officer, Hospital Based Services <i>P. Daniels</i>	
DATE: 10/01/2014		PRODUCT / SERVICE: Product - Equipment; Reagents; Consumables; Control for Coagulation Testing	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Diagnostica Stago, Parsippany, NJ	
ACCOUNT: 897-365 \$970,224.72 891-365 \$ 63,119.01 Total \$1,011,344.00		GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 12/01/2014 thru 11/30/2017		CONTRACT NUMBER: H14-25-055	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

The prior contract was approved by the Cook County Health and Hospitals System (CCHHS) Board of Directors on 11/18/2011 for a period of thirty-six (36) months from 12/05/2011 thru 12/04/2014. The approved amount of the contract was \$1,133,240.25. The vendor provides coagulation instruments, reagents, controls and calibrators.

NEW PROPOSAL JUSTIFICATION:

The request is to execute a contract with Diagnostica Stago that includes upgrades to the previous system. This contract will provide the Pathology Department at Stroger and Provident Hospitals the instruments, instrument maintenance, reagents, controls and calibrators to perform routine and special coagulation tests. The use of this instrument will reduce test turnaround time by reducing manual intervention.

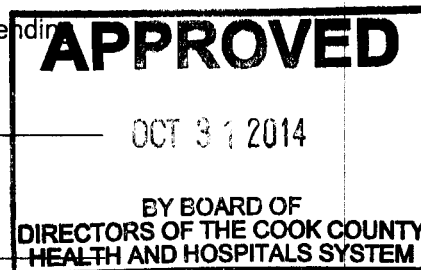
TERMS OF REQUEST:

This is a request to execute contract number H14-25-055 in an amount not to exceed \$1,011,344.00, as needed, for a period of thirty-six (36) months from 12/01/2014 thru 11/30/2017.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: *John Cookinham*
John Cookinham, Chief Financial Officer

CCHHS CEO: *John Jay Shannon*
John Jay Shannon, M.D., Chief Executive Officer



Request #
17

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M. Rothstein CORE Center •

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Revised 03/01/2011

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Donna Hart, Interim Chief Information Officer
DATE: 10/03/2014	PRODUCT / SERVICE: Product- Toner Cartridge for Lexmark Printers	
TYPE OF REQUEST: Execute Contract	VENDOR / SUPPLIER: Tallgrass Systems, Ltd, Orland Park, IL	
ACCOUNT: 890-361	FISCAL IMPACT: \$650,000.00	GRANT FUNDED / RENEWAL AMOUNT: N/A
CONTRACT PERIOD: 11/01/2014 thru 10/31/2015		CONTRACT NUMBER: H14-25-090
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP	
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY: N/A	

PRIOR CONTRACT HISTORY:

NEW PROPOSAL JUSTIFICATION:

This request is for the provision of Lexmark Original Equipment Manufacturer (OEM) and Remanufactured toner cartridges. It is required that we utilize the Lexmark product as we have purchased their printers and no other toner cartridges are compatible with the equipment. The vendor was selected through the RFP process. There were four respondents to the RFP with Tallgrass being the most qualified responder in meeting the required specifications.

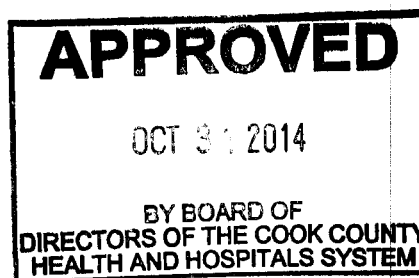
TERMS OF REQUEST:

This is a request to execute contract number H14-25-090 in an amount not to exceed \$650,000.00, as needed, for a period of twelve (12) months from 11/01/2014 thru 10/31/2015.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCHHS CFO: John Cookinham
John Cookinham, Chief Financial Officer

CCHHS CEO: John Jay Shannon
John Jay Shannon, M.D., Chief Executive Officer



Request #
18

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M. Rothstein CORE Center •

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: CaTanya Norwood, Interim System Director of Pharmacy Services		EXECUTIVE SPONSOR: Peter Daniels, Chief Operating Officer, Hospital Based Services <i>P. Daniels</i>	
DATE: 10/02/2014		PRODUCT / SERVICE: Services - Pharmacy Prescription Claims Processing Service	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Medidal, Inc., Waconia, MN	
ACCOUNT: 890-260		FISCAL IMPACT NOT TO EXCEED: \$500,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A
CONTRACT PERIOD: 11/01/2014 thru 10/31/2017		CONTRACT NUMBER: H14-25-045	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: RFP		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

The Cook County Health and Hospital System has no prior contract history with Medidal.

NEW PROPOSAL JUSTIFICATION:

The Cook County Health and Hospitals System (CCHHS) Department of Pharmacy is requesting approval to execute a contract with Medidal (*medical data logistics*) to provide prescription claims processing services for the seven CCHHS ambulatory pharmacies. The services to be performed shall be checking patient eligibility/processing prescription claims for outpatients who are identified as "self-pay" and rebilling claims for prescriptions that have been rejected by third party payors. The service for "self-pay" claims consists of identifying potential third-party payors and verifying Medicaid and Medicare D eligibility. The service category for third party claims consists of billing rejected pharmacy claims for all payers.

The proposed contract is the result of an RFP which had two respondents. Based on the score received on the assessment tool, Medidal received the highest score in the response based upon relevant experience, qualifications, compliance and cost effectiveness.

TERMS OF REQUEST:

This is a request to execute contract number H14-25-045 in an amount not to exceed \$500,000.00, as needed, for thirty-six (36) months from 11/01/2014 thru 10/31/2017.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE?

CCHHS CFO:

John Cookinham
John Cookinham, Chief Financial Officer

CCHHS CEO:

John Jay Shannon
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

OCT 31 2014

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #
19

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M.
Rothstein CORE Center •

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Cook County Health and Hospitals System
Finance Committee Meeting Minutes
October 17, 2014

ATTACHMENT #2



CountyCare Update

Prepared for: CCHHS Board Finance Committee

STEVEN GLASS, EXECUTIVE DIRECTOR,
MANAGED CARE

OCTOBER 17, 2014

IL & Mandatory Managed Care

Implementation of State law requires virtually 100% of Medicaid enrollees in Cook County to select a health plan.

Medicaid beneficiaries in five regions across the State are moving into mandatory managed care.

CountyCare Health Plan

Established October 2012 under CMS 1115 Waiver to early enroll ACA-eligible adults into care

Created as CCHHS department

- Takes advantage of Medicaid expansion under ACA
- Mitigates threat of mandatory Medicaid managed care implementation in Chicago

Obtained health plan status July 1, 2014

Membership Dashboard

	Jul'14	Aug'14	Sep'14	Change From Jul'14	Trend
Monthly Membership	98,886	100,658	92,515	-6.4%	↓
ACA	98,886	100,658	92,350	-6.6%	↓
FHP	0	0	16		
SPD	0	0	85		
Home/Community Waiver	0	0	64		

Composite PMPM rate inclusive of administrative expense beginning 7/1/2014.

- March'14 composite (\$639.76) higher than Waiver PMPM (\$632.48)
- September'14 composite (\$635.07) remains lower than March estimates due to demographic shift in membership

TPA Transition: Service Metrics

22,311 Calls to Call Center in September

- 3-month Average: 26,045/month or 434 calls/day
- Abandon Call Rate and Average Speed To Answer within contracted levels
- Average Hold Time just outside < 1 min contracted level

On-line portal and empanelment issues in final stages of clean-up and resolution

New data analytics tools developed and staff trained

TPA Transition Update: Claims

Dates of Service: 7/1 to 9/29/2014:

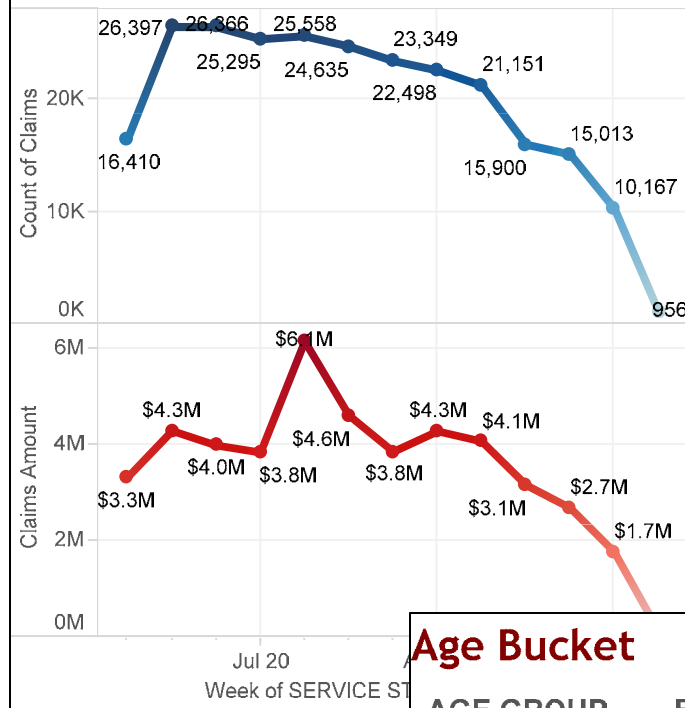
- 248,620 Medical claims processed and/or paid
 - 76,717 (31%) from CCHHS
- \$24.6M external payments in process and/or paid

Catch-up on delay complete

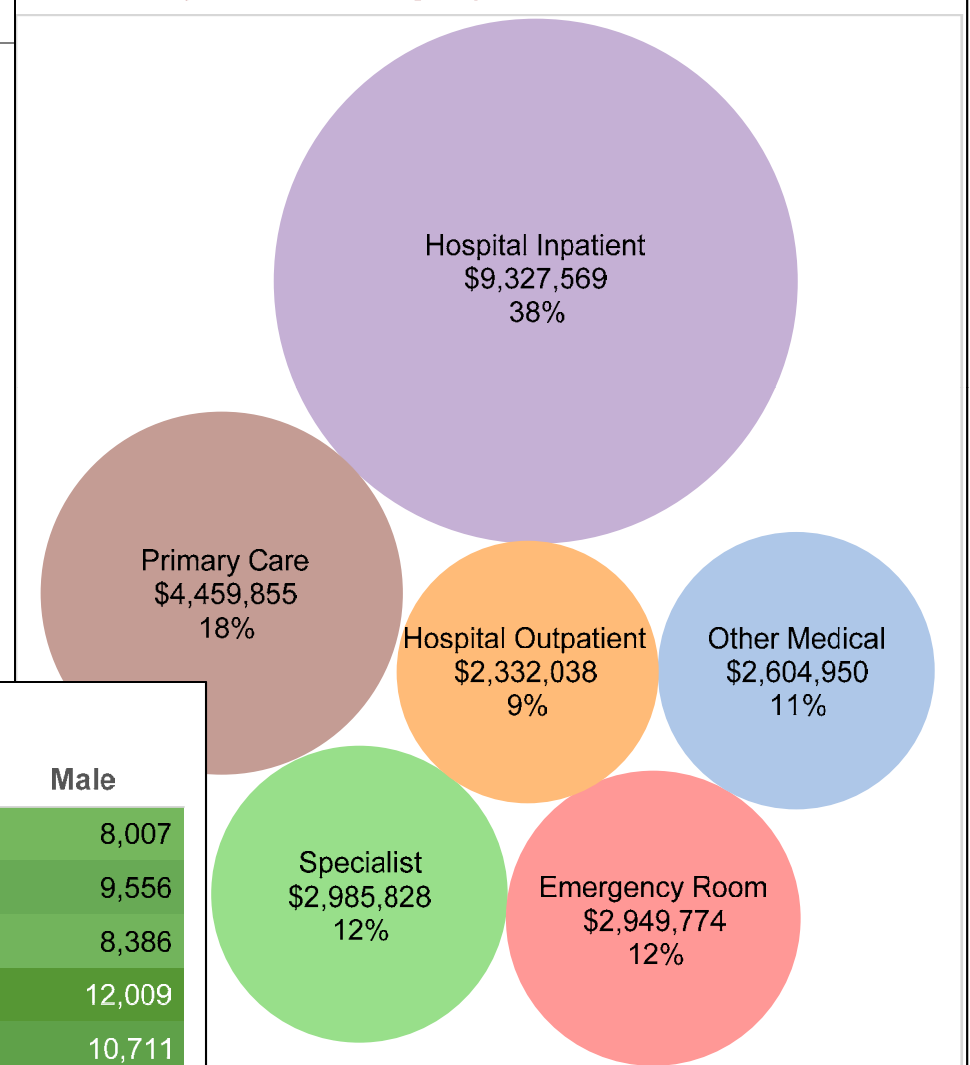
Continued monitoring with Budget Office to avoid future budget hold

Examples of Data Analytics

Claims Trend by Service Date



Claims by Cost Category Bucket



Age Bucket

AGE GROUP	Female	Male
<=24	7,963	8,007
25 - 34	5,037	9,556
35 - 44	4,067	8,386
45 - 54	12,004	12,009
55 - 65	14,914	10,711
76		2
>=66	6	1

MCCN Transition

CountyCare compliance structure developed

- Oversight through CCHHS Board Audit & Compliance Committee

Working with State to resolve newly discovered eligibility issues

- Redetermination & technical glitches

Cook County Health and Hospitals System
Finance Committee Meeting Minutes
October 17, 2014

ATTACHMENT #3

Cook County Health and Hospitals System

Report of the System CFO
August 2014

Cook County Health and Hospitals System

- The average net patient service revenue per day in August was larger than the year to date average because the System received the first BIPA revenue in the period.
- The BIPA revenue received in August was \$93.7 million dollars. BIPA revenue is received two times a year. In the future there will be an accrual each month as the revenue is earned.
- Net patient service revenue per day net of BIPA in August was 3.1 million dollars per day. The July average was also 3.1 million dollars per day.

Cook County Health and Hospitals System

- The loss at the end of August was \$10.2 million dollars which was a reduction of almost \$8 million dollars compared to the loss at the end of July.
- Salaries, Wages, and Benefits averaged 51% of net revenue in August. In July they were 56% of net revenue. The receipt of the BIPA revenue in August had a positive impact.
- Supplies increased by \$20.2 million dollars in August over July. County Care pharmacy expenses year to date are estimated to be 66% of the total supply expense for the System.

Cook County Health and Hospitals System

- Purchased Services , Rental, and Other is the second largest expense category. Salaries, Wages and Benefits are larger.
- CountyCare foreign claims were 39% of the total of the Purchased Services, Rental, and Other category.
- CountyCare foreign claims expenses along with administrative expenses are 59% of the Purchased services, Rental, and Other.

Cook County Health and Hospitals System

Revenue	Acute Care		Public Health		Cermak		Total
Net Patient Service Revenue	\$	941,801,000			\$		941,801,000
Grant Revenue			\$	3,550,000		\$	3,550,000
HER incentive program Rev.	\$	2,927,000				\$	2,927,000
Other Revenue	\$	4,239,000	\$	129,000	\$	2,000	\$ 4,370,000
Total Revenue	\$	948,967,000	\$	3,679,000	\$	2,000	\$ 952,648,000
Operating Expenses							
Salaries, Wages and Benefits	\$	436,000,000	\$	10,925,000	\$	39,206,000	\$ 486,131,000
Supplies	\$	171,375,000	\$	221,000	\$	888,000	\$ 172,484,000
Purchased Serv., Rent & Other	\$	402,999,000	\$	612,000	\$	739,000	\$ 404,350,000
Insurance Expense	\$	20,289,000	\$	407,000	\$	1,611,000	\$ 22,307,000
Depreciation	\$	24,989,000	\$	15,000	\$	181,000	\$ 25,185,000
Utilities	\$	8,427,000	\$	48,000	\$	3,000	\$ 8,478,000
Total Operating Expenses	\$	1,064,079,000	\$	12,228,000	\$	42,628,000	\$ 1,118,935,000
Gain or (Loss) from Operations	\$	(115,112,000)	\$	(8,549,000)	\$	(42,626,000)	\$ (166,287,000)
Nonoperating Revenue							
County Tax Support Revenue	\$	82,695,000	\$	6,148,000	\$	24,637,000	\$ 113,480,000
Interest Income	\$	12,000					\$ 12,000
Retirement Plan Contribution	\$	37,651,000	\$	1,691,000	\$	3,289,000	\$ 42,631,000
Total Nonoperating Revenue	\$	120,358,000	\$	7,839,000	\$	27,927,000	\$ 156,124,000
Net Income (Loss)	\$	5,246,000	\$	(710,000)	\$	(14,699,000)	\$ (10,163,000)

CountyCare

CountyCare Revenue	June YTD	July	August	August YTD
PMPM revenue	\$ 364,671,681	\$ 75,804,555	\$ 63,719,326	\$ 504,195,562
Administrative Revenue	\$ 28,811,440	\$ -	\$	\$ 28,811,440
Revenue for State Workers	\$ (3,186,779)	\$ 6,371,723	\$ 115,053	\$ 3,299,997
Total Revenue	\$ 390,296,342	\$ 82,176,278	\$ 63,834,379	\$ 536,306,999
Plan Administration Expenses				
Salaries, Wages, and Benefits for CCHHS staff	\$ 595,830	\$ 85,000	\$ 153,170	\$ 834,000
Hoyne Facility expenses	\$ 167,102	\$ 23,872	\$ 28,812	\$ 219,786
Stop Loss Insurance	\$ 2,860,690	\$ 415,310	\$ 681,893	\$ 3,957,893
Pharmacy Benefits Manager Fee \$ dispensing fee	\$ 3,071,631	\$ 798,728	\$ 1,092,722	\$ 4,963,081
Psych Health Adm. Fee	\$ 4,214,739	\$ 1,788,222	\$ -	\$ 6,002,961
AHS Provider Services & Processing Fees	\$ 9,200,395	\$ 580,179	\$ 2,166,822	\$ 11,947,396
IlliniCare Adm fees		\$ 6,184,330	\$ 6,099,875	\$ 12,284,205
MHN Administrative Fees	\$ 2,820,436	\$ 985,815	\$ 2,085,872	\$ 5,892,123
Consulting, Outreach, & Advertising	\$ 463,677	\$ 400,407	\$ 107,420	\$ 971,504
	\$ 23,394,502	\$ 11,261,863	\$ 12,416,586	\$ 47,072,951
Application Processing Expenses				
AHS Application Assistance Fees	\$ 13,375,468	\$ 1,939,334	\$ 1,897,500	\$ 17,212,302
CEA Application Assistance Fees	\$ 1,120,911	\$ 156,602	\$ 140,452	\$ 1,417,965
State Workers cost		\$ 6,369,889	\$ 230,107	\$ 6,599,996
	\$ 14,496,379	\$ 8,465,825	\$ 2,268,059	\$ 25,230,263
Claims Expenses				
Domestic Claims at CCHHS facilities	\$ 153,430,360	\$ 26,926,244	\$ 26,599,883	\$ 206,956,487
Foreign Claims Expense and IBNR	\$ 118,927,698	\$ 17,642,919	\$ 20,231,212	\$ 156,801,829
Pharmacy Claims Expenses	\$ 81,109,687	\$ 12,031,525	\$ 21,158,007	\$ 114,299,219
Psych and Substance Abuse Claims Expense	\$ 7,295,147	\$ 1,742,371	\$	\$ 9,037,518
Optical Services		\$ 403,455	\$ 410,685	\$ 814,140
Total Claims Expenses	\$ 360,762,892	\$ 58,746,515	\$ 68,399,787	\$ 487,909,194
Total County Care Expenses	\$ 398,653,773	\$ 78,474,203	\$ 83,084,432	\$ 560,212,408
CountyCare Margin YTD of 2014	\$ (8,357,431)	\$ 3,702,075	\$ (19,250,053)	\$ (23,905,409)
Benefit to CCHHS - Domestic Seviles and Pharmacy	\$ 155,072,929	\$ 30,628,319	\$ 7,349,830	\$ 193,051,078

CountyCare

- CountyCare switched its third party administrator in July. There will continue to be some over lap between the new TPA and the former TPA until the end of the year.
- The switch in the TPA will eventually provide greater access to accurate and timely data to manage the cost of care for CountyCare than in the past.
- The payments for services after June 30th are to be processed by the new TPA and the claims from the 1115 Waiver project are being addressed by the former TPA. This should make reporting easier.

Cook County Health and Hospitals System
Finance Committee Meeting Minutes
October 17, 2014

ATTACHMENT #4

Cook County Health and Hospitals System

Financial Statements

Year To Date August 31, 2014

As of September 23, 2014

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COOK COUNTY HEALTH & HOSPITALS SYSTEM

MISSION STATEMENT

The Cook County Health and Hospitals System will deliver integrated health services with dignity and respect regardless of a patient's ability to pay; and,

Foster partnerships with other health providers and communities to enhance the health of the public; and,

Advocate for policies, which promote and protect the physical, mental and social well being of the people of Cook County.

Board of Directors
Cook County Health and Hospitals System

The accompanying financial statements of Cook County Health and Hospitals System and the related Management's Discussion and Analysis for the month ended August 31, 2014 have been prepared by Management who is responsible for their presentation and disclosure. The statements have not been compiled, reviewed or audited by independent accountants.

CCHHS maintains an internal control structure designed to provide reasonable assurance that assets are safeguarded and that transactions are properly executed, recorded and summarized to produce reliable records and reports,

To the best of Management's knowledge and belief the statements were prepared in conformity with generally accepted accounting principles and governmental accounting standards using the accrual basis of accounting and are based on recorded transactions and Management's best estimates and judgment.

John Cookinham, Chief Financial Officer _____

Dorothy M. Loving, Executive Director of Finance _____

MANAGEMENT'S DISCUSSION AND ANALYSIS

INTRODUCTION

This discussion and analysis provides the readers of the monthly unaudited financial statements of the Cook County Health and Hospital System (CCHHS) with an overview of the financial activities for the month ended August 31, 2014. This discussion focuses on the significant financial issues and major financial activities during the current month. It should be read in conjunction with the accompanying financial statements of the CCHHS.

The CCHHS includes the following entities: John H. Stroger Jr. Hospital (JSH), Oak Forest Health Center (OFC) Provident Hospital (PHCC), the Department of Public Health (DPH), the Ambulatory and Community Health Network (ACHN), the Bureau of Health Services (BHS), CORE Center (for reporting purposes part of Stroger Hospital), and Cermak Health Services (CHS). Starting this fiscal year 2013, we have added the Medicaid Expansion. Collectively, these entities provide primary, intermediate, acute, and tertiary medical care to patients, without regard to their ability to pay. The Bureau of Health Services oversees the operational, planning, and policy activities of the CCHHS.

The CCHHS is included in the reporting entity of the Cook County, Illinois, as an enterprise fund. As an enterprise fund, the CCHHS' financial statements are prepared using proprietary fund accounting that focuses on the determination of changes in net assets, financial position, and cash flows in a manner similar to private sector businesses. The financial statements are prepared on an accrual basis of accounting, which recognizes revenue when earned and expenses when incurred.

In 2008 the Cook County Health and Hospital System Board was created by the Cook County Board of Commissioners to provide independent oversight of health care operations, and in 2010 the Cook County Board of Commissioners voted to make the Cook County Health and Hospital System Board permanent.

In 2012 the Cook County Health and Hospitals System and Cook County Board Officials collaborated to cut Medicaid costs, help county taxpayers, and transform Cook County's hospital system by jump-starting national health care reform in Cook County. In November, 2012 the federal government approved the 1115 Medicaid Waiver for Cook County, allowing CCHHS to enroll more than 115,000 individuals who will be eligible for Medicaid in 2014 into a Cook County network with no cost to the state of Illinois.

Medicaid Expansion allows the Cook County's Health System to early enroll certain uninsured patients into Medicaid. Specifically, these are patients who are not currently eligible for Medicaid, but who will be eligible in 2014 under the Accountable Care Act. Many of these individuals are patients who already are being treated by our system without compensation. The Waiver is funded entirely by the federal government.

FINANCIAL HIGHLIGHTS (IN THOUSANDS)

The Cook County Health and Hospitals System finished the nine months with overall revenue of \$1,108,772 and overall expenses was \$1,118,935.

Net Patient revenue for the nine months was \$941,801.

Net Patient revenue consists of all charges including automated contractual allowances and bad debt adjustments. Write-off of Bad Debt is a CCHHS Board approved policy.

Other revenue was \$4,370. Other revenue consists primarily of parking revenue.

Patient Accounts Receivable

General

As compared to November 30, 2013, Total Patient Accounts Receivable at the end of August-2014 increased by 10 to 115 days. Additionally, there was a 1 day decrease in this figure, as compared to the previous month's figure.

Days of Revenue Outstanding measures the average number of days charges remain in accounts receivable after service has been rendered before collection activities have been completed, including charity care and bad debt write-offs. Days of Revenue Outstanding is measured in charges, not cash collections.

Days of Revenue Outstanding is a useful tool to measure collection efforts over time (i.e., whether this number is growing or decreasing). This number will be large due to the large number of Self-Pay patients CCHHS services and the processes CCHHS must complete before patient accounts are collected or written-off to bad debt. These processes include, but are not limited to, the following:

- Making an effort to attain third-party insurance coverage, including the Medicaid Expansion Program and MANG applications;
- Processing charity care applications;
- Sending three (3) monthly statements before accounts are turned over to collections;
- Placing accounts bi-monthly with the collection agency; and
- Permitting patients to pay their account balances over time (time payment).

Total billed accounts grew by \$34M (10.6%) as compared to the November-2013 balance. As compared to the previous month, this figure increased by \$4.856M (1.4%). The growth in this figure indicates a decreasing number of accounts are completing the collection process, which includes charity care and bad debt write-offs.

The change in this figure does not translate dollar-for-dollar into actual cash receipts, as Medicaid pays CCHHS' claims on a per-diem and Medicare pays CCHHS' claims based upon the diagnosis, regardless of charges on the patient accounts. Additionally, charity

care and bad debt write-offs are part of the collection process and will not result in actual cash collections. Finally, the reimbursement for Medicaid Expansion Program patients is made through a per-member-per-month payment, not a claim-by-claim basis.

Inpatient Accounts Receivable

Discharged Not Final Billed

Inpatient discharged but not final billed accounts at the end of August-2014 increased by \$4.432M (52.4%), as compared the November 30, 2013 balance and increased by \$1.372M (11.9%), as compared to the previous month's balance. This indicates that fewer inpatient accounts are moving to a "Billed" status, as compared to the previous month.

The change in this figure does not translate dollar-for-dollar into actual cash receipts, as Medicaid pays CCHHS' claims on a per-diem and Medicare pays CCHHS' claims based upon the diagnosis, regardless of charges on the patient accounts. Additionally, charity care and bad debt write-offs are part of the collection process and will not result in actual cash collections. Finally, the reimbursement for Medicaid Expansion Program patients is made through a per-member-per-month payment, not a claim-by-claim basis.

Billed Inpatient Accounts

Billed inpatient accounts at the end of August-2014 increased by \$20.617M (12.9%) as compared to the November 30, 2013 balance. This figure fell by \$4.900M (-2.6%) compared to the previous month's total.

The decrease in this number indicates more accounts had the collection process completed than in the previous month and that a greater number of accounts are being removed from active accounts receivable. CCHHS' collection process includes charity care and bad debt write-offs.

The change in this figure does not translate dollar-for-dollar into actual cash receipts, as Medicaid pays CCHHS' claims on a per-diem and Medicare pays CCHHS' claims based up on the diagnosis, regardless of charges on the patient accounts. Additionally, charity care and bad debt write-offs are part of the collection process and will not result in actual cash collections. Finally, the reimbursement for Medicaid Expansion Program patients is made through a per-member-per-month payment, not a claim-by-claim basis.

Outpatient Accounts Receivable

Unbilled Outpatient Accounts

The balance of unbilled outpatient accounts increased by \$5.961M (55%) by the end of August-2014, as compared to the level of unbilled accounts as of November 30, 2013. This balance was \$1.715M (-9.3%) less than the previous month's balance. This change indicates that more outpatient accounts are moving to a "Billed" status, as compared to the previous month.

The change in this figure does not translate dollar-for-dollar into actual cash receipts due to Medicaid's and Medicare's reimbursement configuration.

Billed Outpatient Accounts

The billed outpatient accounts receivable at the end of August-2014 increased by \$13.383M (8.3%), as compared to the balance as of November 30, 2013. This figure is \$9.756M (5.9%) greater than last month's figure.

The growth in this figure indicates that fewer Out-Patient accounts had their collection and write-off related activities completed, as compared to the prior month.

The change in this figure does not translate dollar-for-dollar into actual cash receipts due to Medicaid and Medicare's reimbursement configuration and to charity care and bad debt write-offs.

Carelink Program Activities (Charity Care)

The volume and dollar amounts written-off to charity care are as follows:

	Number of Accounts for August-2014	Value of Accounts for August-2014	Cumulative Number of Accounts Through August-2014	Cumulative Value of Accounts Through August-2014
In-Patient	602	\$8.219M	4,857	\$54.656M
Out-Patient	23,171	\$14.251M	181,024	\$93.727
Totals	23,773	\$22.470M	185,881	\$148.383M

The above data does not include bad-debt write-offs; it includes only the amounts written-off directly to charity care.

Operating Expenses at the end of the nine months was \$1,118.935M broken down as follows:

Salaries and Wages - \$384.127M
 Benefits - \$102.005M
 Supplies - \$172.485M
 Purchased Services, Rental, and Other - \$404.350M
 Insurance - 22.307M
 Depreciation - \$25.185M
 Utilities - \$8.477M

Nonoperating Revenue was \$156.124M. The largest portions of this are attributed to cigarette tax in the amount of \$81.831M and property tax in the amount of \$27.912M. For the current fiscal year, Nonoperating revenues allocated to CCHHS are Cigarette

Tax, Other Tobacco products and Firearms Tax. There is no Sales Tax allocated to CCHHS for the current fiscal year.

Taxes collected for the Health to date have been fully credited to the Health Fund.

OVERVIEW OF THE FINANCIAL STATEMENTS

This discussion and analysis are intended to serve as an introduction to the CCHHS financial statements. CCHHS basic monthly unaudited financial statements are comprised of fund financial statements.

A fund is a grouping of related accounts that is used to maintain control over resources that have been segregated for specific activities or objectives. The CCHHS, like other state and local governments, uses fund accounting to ensure and demonstrate compliance with finance-related legal requirements.

Accounts Receivable Comparison
Cook County Health and Hospitals System
Fiscal Year 2014

	December-2013 BEPA	January-2014 BEPA	February-2014 BEPA	March-2014 BEPA	April-2014 BEPA	May-2014 BEPA	June-2014 BEPA	July-2014 BEPA	August-2014 BEPA
Inpatient									
In-House	\$ 10,796,900.99	\$ 13,917,134.62	\$ 14,385,690.34	\$ 14,352,802.51	\$ 14,618,185.46	\$ 14,481,038.58	\$ 14,094,231.42	\$ 15,230,693.40	\$ 13,433,293.36
Discharged Not Final Billed	\$ 8,255,685.28	\$ 12,566,390.00	\$ 14,371,169.91	\$ 11,326,516.98	\$ 10,836,232.95	\$ 12,036,335.60	\$ 12,172,114.80	\$ 11,524,049.55	\$ 12,895,917.43
Billed	\$ 159,968,730.29	\$ 158,273,172.95	\$ 166,876,862.34	\$ 179,986,128.88	\$ 185,410,673.33	\$ 187,667,283.79	\$ 182,625,565.33	\$ 184,910,378.13	\$ 180,010,567.53
Total Inpatient Asccounts Receivable	\$ 179,021,316.56	\$ 184,756,697.57	\$ 195,633,722.59	\$ 205,665,448.37	\$ 210,865,091.74	\$ 214,184,657.97	\$ 208,891,911.55	\$ 211,665,121.08	\$ 206,339,778.32
Outpatient									
Unbilled	\$ 9,889,776.46	\$ 12,239,462.73	\$ 11,731,988.48	\$ 13,059,760.77	\$ 19,381,653.66	\$ 13,427,576.60	\$ 14,185,100.51	\$ 18,520,701.71	\$ 16,805,781.20
Billed	\$ 141,634,392.86	\$ 140,498,326.88	\$ 141,967,209.93	\$ 142,130,816.69	\$ 148,500,462.20	\$ 165,475,797.72	\$ 162,968,064.27	\$ 164,063,090.46	\$ 173,819,187.17
Total Outpatient Accounts Receivable	\$ 151,524,169.32	\$ 152,737,789.61	\$ 153,699,198.41	\$ 155,190,577.46	\$ 167,882,115.86	\$ 178,903,374.32	\$ 177,153,164.78	\$ 182,583,792.17	\$ 190,624,968.37
Combined Inpatient and Outpatient A/R									
Unbilled	\$ 28,942,362.73	\$ 38,722,987.35	\$ 40,488,848.73	\$ 38,739,080.26	\$ 44,836,072.07	\$ 39,944,950.78	\$ 40,451,446.73	\$ 45,275,444.66	\$ 43,134,991.99
Billed	\$ 301,603,123.15	\$ 298,771,499.83	\$ 308,844,072.27	\$ 322,116,945.57	\$ 333,911,135.53	\$ 353,143,081.51	\$ 345,593,629.60	\$ 348,973,468.59	\$ 353,829,754.70
Total IP and OP Accounts Receivable	\$ 330,545,485.88	\$ 337,494,487.18	\$ 349,332,921.00	\$ 360,856,025.83	\$ 378,747,207.60	\$ 393,088,032.29	\$ 386,045,076.33	\$ 394,248,913.25	\$ 396,964,746.69
Average Daily Revenue	\$ 3,268,842.00	\$ 3,170,975.00	\$ 3,223,209.00	\$ 3,307,874.00	\$ 3,420,588.00	\$ 3,435,726.00	\$ 3,423,768.00	\$ 3,404,160.00	\$ 3,437,328.00
Days of Revenue Outstanding	101	106	108	109	111	114	113	116	115

Cook County Health Facilities
Combining Balance Sheet of General Funds (Unaudited)
(In Thousands)
August 31, 2014

	Stroger Hospital	ACHN (Clinics)	Medicaid Expansion	Stroger, ACHN & Medicaid Exp	O F C (Oak Forest)	Provident Hospital	Bureau of Health	Hospitals Total	Dept of Public Health	Cermak	Intra-Activity Eliminations	Grand Total
ASSETS												
CURRENT ASSETS:												
Cash and cash equivalents:												
Cash in banks	7,269	0		7,270	23	196		7,488				7,488
Cash held by Cook Co Treas	774,691		259,591	1,034,282	96,675	126,124		1,257,080	140,970		(1,221,856)	176,194
Due from working cash fund	60,540	34,607		95,147				95,147				95,147
Total cash & cash equivalent	842,500	34,608	259,591	1,136,698	96,697	126,320		1,359,716	140,970		(1,221,856)	278,829
Property taxes receivable:												
Tax levy - current year	8,014	7,546		15,559	796	1,127	2,124	19,606	1,157	8,430		29,194
Tax levy - prior year	2,869	3,378		6,247	418	516	292	7,473	827			8,300
Total property taxes rec	10,883	10,924		21,807	1,214	1,643	2,416	27,079	1,984	8,430		37,493
Receivables:												
Patient AR-net of allowances	40,517			40,517	(0)	6,117		46,633				46,633
Third-party settlements	5,358			5,358		402		5,759				5,759
Thirdparty settl medicaid ex												
Other receivables	699	15		713	0	575	9	1,297	3,463	0		4,760
Due from State	1,769	1,949	62,348	66,066	524	853	169	67,613	717	1,468		69,797
Total receivables	48,342	1,963	62,348	112,653	524	7,947	178	121,303	4,179	1,468		126,950
Inventories	3,784			3,784	256	1,180		5,220		370		5,591
TOTAL CURRENT ASSETS	905,509	47,494	321,939	1,274,942	98,692	137,090	2,594	1,513,318	147,133	10,269	(1,221,856)	448,864
CAPITAL ASSETS:												
Depreciable assets - net	337,635	5,182		342,816	25,733	22,469	11,533	402,551	23	467		403,041
TOTAL ASSETS	1,243,144	52,676	321,939	1,617,759	124,424	159,559	14,127	1,915,869	147,157	10,736	(1,221,856)	851,905

Cook County Health Facilities
Combining Balance Sheet of General Funds (Unaudited)
(In Thousands)
August 31, 2014

	Stroger Hospital	ACHN (Clinics)	Medicaid Expansion	Stroger, ACHN & Medicaid Exp	O F C (Oak Forest)	Provident Hospital	Bureau of Health	Hospitals Total	Dept of Public Health	Cermak	Intra-Activity Eliminations	Grand Total
LIABILITIES & NET POSITION												
CURRENT LIABILITIES:												
Due to Cook County Treasurer		58,643		58,643			1,046,145	1,104,787		117,069	(1,221,856)	
Accounts payable	17,021	430	2,738	20,189	676	2,154	18,659	41,678	387	204		42,269
Claims Payable			173,754	173,754				173,754				173,754
Accrued salaries, wages, & other liabilities	6,983	835	261	8,079	142	730	1,049	9,999		897		10,897
Compensated absences	4,187	488	64	4,740	56	469	584	5,848	160	404		6,412
Deferred revenue	73,949			73,949		2,612		76,562				76,562
Third-party settlements			33,500	33,500				33,500				33,500
Due to other co govt funds	21			21	10	5		36	7			43
Due to others	6,037		51	6,088	19			6,106				6,106
Interaccount payabl (recevbl)	200,545	(29,545)	(12,636)	158,364	8,395	50,023	(225,088)	(8,306)	2	8,305		
TOTAL CURRENT LIABILITIES	308,743	30,851	197,733	537,327	9,297	55,994	841,348	1,443,965	556	126,878	(1,221,856)	349,544
LONG-TERM LIABILITIES:												
Compensated absences	23,727	2,767	365	26,859	316	2,658	3,308	33,141	906	2,287		36,334
Reserve-tax objection suits	3,979	4,690		8,669	741	709	401	10,520	1,144			11,665
TOTAL LIABILITIES	336,449	38,308	198,098	572,855	10,353	59,361	845,057	1,487,627	2,606	129,166	(1,221,856)	397,543
NET POSITION:												
Investment in capital assets	337,635	5,182		342,816	25,733	22,469	11,533	402,551	23	467		403,041
Unrestricted	569,060	9,186	123,841	702,088	88,338	77,729	(842,463)	25,691	144,527	(118,897)		51,321
TOTAL NET POSITION	906,695	14,368	123,841	1,044,904	114,071	100,198	(830,931)	428,242	144,551	(118,430)		454,363
TOTAL LIABILITIES & NET POSITION	1,243,144	52,676	321,939	1,617,759	124,424	159,559	14,127	1,915,869	147,157	10,736	(1,221,856)	851,905

Cook County Health Facilities
Combining Income Statement of General Funds (Unaudited)
(In Thousands)
August 31, 2014

	Stroger Hospital	ACHN (Clinics)	Medicaid Expansion	Stroger, ACHN & Medicaid Exp	O F C (Oak Forest)	Provident Hospital	Bureau of Health	Hospitals Total	Dept of Public Health	Cermak	Grand Total
REVENUE:											
Net patient service revenue	277,449	112,397	536,307	926,153	37	15,611		941,801			941,801
Grant revenue									3,550		3,550
EHR incentive program revenue	2,653			2,653		275		2,927			2,927
Other revenue	3,548	285		3,833	186	222	(2)	4,239	129	2	4,370
Total Revenue:	283,650	112,682	536,307	932,639	222	16,108	(2)	948,967	3,679	2	952,648
OPERATING EXPENSES:											
Salaries and wages	242,238	37,181	608	280,027	4,931	24,594	35,885	345,437	7,927	30,763	384,127
Employee benefits	63,779	9,425	226	73,430	1,288	6,476	9,369	90,563	2,998	8,443	102,005
Supplies	18,918	14,492	101,078	134,488	659	2,696	33,531	171,375	221	888	172,485
Purchased svcs, rental & other	42,828	3,355	296,534	342,717	1,285	6,556	52,442	402,999	612	739	404,350
Insurance expense	11,669	1,505	3,958	17,132	237	1,146	1,774	20,289	407	1,611	22,307
Depreciation	16,573	593		17,166	1,752	1,379	4,691	24,989	15	181	25,185
Utilities	4,919	110	28	5,057	1,281	930	1,158	8,427	48	3	8,477
TOTAL OPERATING EXPENSES	400,924	66,661	402,432	870,017	11,435	43,776	138,851	1,064,079	12,228	42,627	1,118,935
GAIN (LOSS) FROM OPERATIONS	(117,275)	46,020	133,876	62,622	(11,212)	(27,668)	(138,853)	(115,112)	(8,549)	(42,626)	(166,287)
NONOPERATING REVENUE:											
Property taxes	7,578	7,029		14,606	715	1,050	2,079	18,450	1,032	8,430	27,912
Cigarette taxes	24,440	25,303		49,743	2,931	3,802	4,892	61,368	4,913	15,549	81,831
Other Tobacco Product taxes	1,019	1,053		2,072	121	158	206	2,556	203	658	3,418
Fire Arms taxes	321			321				321			321
Interest income	12	0		12	0	0		12	0	0	12
Retirement plan contribution	26,388	4,178	68	30,634	530	2,799	3,688	37,651	1,691	3,289	42,631
TOTAL NONOPERATING REVENUE	59,757	37,563	68	97,388	4,298	7,808	10,865	120,358	7,839	27,927	156,124
NET INCOME (LOSS)	(57,517)	83,583	133,944	160,009	(6,915)	(19,860)	(127,988)	5,246	(710)	(14,699)	(10,163)
Transfer (out) in	200			200			(200)				
Capital contributions	1,120	84		1,203		23	671	1,897			1,897
Change In net position	(56,198)	83,667	133,944	161,412	(6,915)	(19,837)	(127,517)	7,143	(710)	(14,699)	(8,266)
Net Position at beginning of year	962,893	(69,299)	(10,103)	883,492	120,985	120,035	(703,413)	421,099	145,261	(103,731)	462,628
Net Position at end of year	906,695	14,368	123,841	1,044,904	114,071	100,198	(830,931)	428,242	144,551	(118,430)	454,363

Cook County Health Facilities
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Net patient service revenue	765,312	176,489	941,801
Grant revenue	3,498	52	3,550
EHR incentive program revenue	2,927		2,927
Other revenue	4,344	26	4,370
Total Revenue	<u>776,082</u>	<u>176,566</u>	<u>952,648</u>
OPERATING EXPENSES:			
Salaries and wages	340,780	43,347	384,127
Employee benefits	90,456	11,549	102,005
Supplies	152,292	20,193	172,485
Purchased svcs, rental & other	300,043	104,307	404,350
Insurance expense	19,586	2,721	22,307
Depreciation	22,386	2,798	25,185
Utilities	6,620	1,857	8,477
TOTAL OPERATING EXPENSES	<u>932,163</u>	<u>186,772</u>	<u>1,118,935</u>
GAIN (LOSS) FROM OPERATIONS	<u>(156,081)</u>	<u>(10,206)</u>	<u>(166,287)</u>
NONOPERATING REVENUE:			
Property taxes	24,379	3,533	27,912
Cigarette taxes	72,374	9,457	81,831
Other tobacco product taxes	3,035	383	3,418
Fire Arms taxes	293	28	321
Interest income	12	0	12
Retirement plan contribution	37,894	4,737	42,631
TOTAL NONOPERATING REVENUE	<u>137,986</u>	<u>18,138</u>	<u>156,124</u>
NET INCOME (LOSS)	<u>(18,094)</u>	<u>7,932</u>	<u>(10,163)</u>

Stroger Hospital
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Net patient service revenue	182,863	94,586	277,449
EHR incentive program revenue	2,653		2,653
Other revenue	3,571	(23)	3,548
Total Revenue	189,087	94,563	283,650
OPERATING EXPENSES:			
Salaries and wages	214,988	27,249	242,238
Employee benefits	56,568	7,211	63,779
Supplies	16,970	1,948	18,918
Purchased svcs, rental & other	34,581	8,247	42,828
Insurance expense	10,372	1,297	11,669
Depreciation	14,732	1,841	16,573
Utilities	3,683	1,236	4,919
TOTAL OPERATING EXPENSES	351,896	49,029	400,924
GAIN (LOSS) FROM OPERATIONS	(162,808)	45,534	(117,274)
NONOPERATING REVENUE:			
Property taxes	6,588	990	7,578
Cigarette taxes	21,844	2,596	24,440
Other tobacco product taxes	914	105	1,019
Fire Arms taxes	293	28	321
Interest income	12	0	12
Retirement plan contribution	23,456	2,932	26,388
TOTAL NONOPERATING REVENUE	53,107	6,651	59,757
NET INCOME (LOSS)	(109,702)	52,185	(57,517)

Note: Reduction in Other Revenue is the result of correction of prior month's revenue.

ACHN (Clinics)
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Net patient service revenue	99,780	12,616	112,397
Other revenue	285		285
Total Revenue	100,065	12,616	112,682
OPERATING EXPENSES:			
Salaries and wages	32,900	4,281	37,181
Employee benefits	8,418	1,006	9,425
Supplies	12,945	1,547	14,492
Purchased svcs, rental & other	2,912	443	3,355
Insurance expense	1,338	167	1,505
Depreciation	527	66	593
Utilities	95	15	110
TOTAL OPERATING EXPENSES	59,136	7,525	66,661
GAIN (LOSS) FROM OPERATIONS	40,930	5,091	46,020
NONOPERATING REVENUE:			
Property taxes	6,075	954	7,029
Cigarette taxes	22,859	2,444	25,303
Other tobacco product taxes	954	99	1,053
Interest income	0		0
Retirement plan contribution	3,223	955	4,178
TOTAL NONOPERATING REVENUE	33,110	4,452	37,563
NET INCOME (LOSS)	74,040	9,543	83,583

Medicaid Expansion
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	<u>July 31, 2014</u>	<u>Inc (Dec)</u>	<u>August 31, 2014</u>
REVENUE:			
Net patient service revenue	472,473	63,835	536,307
Total Revenue	472,473	63,835	536,307
OPERATING EXPENSES:			
Salaries and wages	541	68	608
Employee benefits	140	85	226
Supplies	94,740	6,337	101,078
Purchased svcs, rental & other	206,886	89,648	296,534
Insurance expense	3,276	682	3,958
Utilities	28		28
TOTAL OPERATING EXPENSES	305,611	96,821	402,432
GAIN (LOSS) FROM OPERATIONS	166,862	(32,986)	133,876
NONOPERATING REVENUE:			
Retirement plan contribution	551	(483)	68
TOTAL NONOPERATING REVENUE	551	(483)	68
NET INCOME (LOSS)	167,413	(33,469)	133,944

Oak Forest Health Center
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Net patient service revenue	23	13	37
Other revenue	171	14	186
Total Revenue	195	28	222
OPERATING EXPENSES:			
Salaries and wages	4,371	560	4,931
Employee benefits	1,143	146	1,288
Supplies	648	11	659
Purchased svs, rental & other	1,235	50	1,285
Insurance expense	211	26	237
Depreciation	1,558	195	1,752
Utilities	992	289	1,281
TOTAL OPERATING EXPENSES	10,158	1,277	11,435
GAIN (LOSS) FROM OPERATIONS	(9,963)	(1,249)	(11,212)
NONOPERATING REVENUE:			
Property taxes	608	107	715
Cigarette taxes	2,674	258	2,931
Other tobacco product taxes	111	10	121
Interest income	0	0	0
Retirement plan contribution	471	59	530
TOTAL NONOPERATING REVENUE	3,863	434	4,298
NET INCOME (LOSS)	(6,100)	(815)	(6,915)

Provident Hospital
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Net patient service revenue	10,172	5,439	15,611
EHR incentive program revenue	275		275
Other revenue	222		222
Total Revenue	10,669	5,439	16,108
OPERATING EXPENSES:			
Salaries and wages	21,826	2,768	24,594
Employee benefits	5,731	745	6,476
Supplies	2,562	135	2,696
Purchased svcs, rental & other	6,140	416	6,556
Insurance expense	1,019	127	1,146
Depreciation	1,226	153	1,379
Utilities	747	183	930
TOTAL OPERATING EXPENSES	39,249	4,527	43,776
GAIN (LOSS) FROM OPERATIONS	(28,580)	912	(27,668)
NONOPERATING REVENUE:			
Property taxes	907	143	1,050
Cigarette taxes	3,437	365	3,802
Other tobacco product taxes	143	15	158
Interest income	0	0	0
Retirement plan contribution	2,488	311	2,799
TOTAL NONOPERATING REVENUE	6,974	834	7,808
NET INCOME (LOSS)	(21,606)	1,746	(19,860)

Bureau of Health
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Other revenue	(2)		(2)
Total Revenue	(2)		(2)
OPERATING EXPENSES:			
Salaries and wages	31,794	4,091	35,885
Employee benefits	8,309	1,061	9,369
Supplies	23,250	10,282	33,531
Purchased svcs, rental & other	47,083	5,359	52,442
Insurance expense	1,576	197	1,774
Depreciation	4,170	521	4,691
Utilities	1,030	129	1,158
TOTAL OPERATING EXPENSES	117,212	21,640	138,851
GAIN (LOSS) FROM OPERATIONS	(117,214)	(21,640)	(138,853)
NONOPERATING REVENUE:			
Property taxes	1,834	246	2,079
Cigarette taxes	4,204	688	4,892
Other tobacco product taxes	178	28	206
Retirement plan contribution	3,278	410	3,688
TOTAL NONOPERATING REVENUE	9,493	1,371	10,865
NET INCOME (LOSS)	(107,720)	(20,268)	(127,988)

Dept of Public Health
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Grant revenue	3,498	52	3,550
Other revenue	95	34	129
Total Revenue	3,593	86	3,679
OPERATING EXPENSES:			
Salaries and wages	7,081	846	7,927
Employee benefits	2,659	339	2,998
Supplies	296	(74)	221
Purchased svcs, rental & other	544	68	612
Insurance expense	362	45	407
Depreciation	13	2	15
Utilities	42	6	48
TOTAL OPERATING EXPENSES	10,996	1,232	12,228
GAIN (LOSS) FROM OPERATIONS	(7,403)	(1,146)	(8,549)
NONOPERATING REVENUE:			
Property taxes	875	157	1,032
Cigarette taxes	4,538	375	4,913
Other tobacco product taxes	188	15	203
Interest income	0		0
Retirement plan contribution	1,503	188	1,691
TOTAL NONOPERATING REVENUE	7,104	735	7,839
NET INCOME (LOSS)	(299)	(411)	(710)

Note: Reduction in Supplies is the result of correction of prior month's expenses.

Cermak
Comparative Income Statement of General Funds (Unaudited)
(In Thousands)
Year to Date August 31, 2014

	July 31, 2014	Inc (Dec)	August 31, 2014
REVENUE:			
Other revenue	2	0	2
Total Revenue	2	0	2
OPERATING EXPENSES:			
Salaries and wages	27,280	3,483	30,763
Employee benefits	7,488	956	8,443
Supplies	881	8	888
Purchased svs, rental & other	662	77	739
Insurance expense	1,432	179	1,611
Depreciation	161	20	181
Utilities	3		3
TOTAL OPERATING EXPENSES	37,905	4,722	42,627
GAIN (LOSS) FROM OPERATIONS	(37,903)	(4,722)	(42,626)
NONOPERATING REVENUE:			
Property taxes	7,493	937	8,430
Cigarette taxes	12,819	2,731	15,549
Other Tobacco Product taxes	548	111	658
Interest income	0		0
Retirement plan contribution	2,924	365	3,289
TOTAL NONOPERATING REVENUE	23,783	4,143	27,927
NET INCOME (LOSS)	(14,120)	(579)	(14,699)

COOK COUNTY HEALTH AND HOSPITALS SYSTEM
FINANCIAL STATEMENT DISCLOSURE CHECKLIST

Fiscal Year 2013

OBJECTIVE:

The object of this checklist is to help determine if the form and contents of the financial statements are in conformity with the accounting standards applicable to financial statement basis of accounting.

DISCLOSURE PRINCIPLES:

Note: Management can comply with a disclosure principle by making disclosure in body of financial statements or in the notes accompanying the financial statements. In a compilation engagement, management's election to omit substantially all disclosures applies to all disclosure principles in GAAP financial statements.

	Yes, N/A, No?	If no, state reason (immaterial, estimated, etc.)
FINANCIAL STATEMENT REFERENCES:		
1. Do the financial statements reference footnotes (MD&A) or selected information?	Yes	
GENERAL DISCLOSURES:		
<u>A. Estimates:</u>		
1. General disclosure about use of estimates (MD&A)?	Yes	
2. Disclosure of possible changes in estimates?	Yes	
<u>B. Vulnerabilities do to concentrations in following areas disclosed?:</u>		
1. Customers?	Yes	
2. Suppliers?	Yes	
3. Lenders?	Yes	
4. Products?	Yes	
5. Supply of materials, labor or supplies?	Yes	
6. Location of assets in geographic area?	Yes	
<u>C. Related parties (FASB 57):</u>		
1. Known common control and economic dependency disclosure?	Yes	
2. Known transactions with related parties disclosed?	Yes	
<u>OTHER DISCLOSURE AREAS TO BE CONSIDERED:</u>		
1. Method of consolidations?	Yes	
2. Accounting changes including changes in GAAP and in estimates?	Yes	
3. Business combinations?	Yes	
4. Discontinues operations?	Yes	
5. Going concern?	Yes	

COMMENTS:

Completed by _____
 Reviewed by _____

Date _____
 Date _____

Cook County Health and Hospitals System

Financial Operations and Statistical Reports
(Non GAAP)

For the Month Ended August 31, 2014

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*** Final Cash Report ***

For the Month August-2014				Cumulative Cash Summary Through August-2014			
	Actual	Budget	Variance		Actual	Budget	Variance
SHCC				SHCC			
Medicare	\$ 7,168,121	\$ 5,031,497	\$ 2,136,624	Medicare	\$ 53,453,295	\$ 44,471,942	\$ 8,981,353
Medicaid	8,936,208	9,315,510	(379,302)	Medicaid	98,905,809	90,826,221	8,079,588
Other	2,337,113	1,838,317	498,796	Other	19,883,283	16,248,351	3,634,932
Physician Billing	705,601	948,933	(243,332)	Physician Billing	6,846,657	8,594,453	(1,747,796)
Medicaid Retroactive Payment	-	-	-	Medicaid Retroactive Payment	5,645,496	-	5,645,496
UPL Medicaid Payment	-	-	-	UPL Medicaid Payment	-	-	-
Vendor Payments From Revenue	-	-	-	Vendor Payments From Revenue	-	-	-
Pharmacy Billing	-	-	-	Pharmacy Billing	-	-	-
Collection Agency	(4,512)	-	(4,512)	Collection Agency	(156,168)	-	(156,168)
Revenue Enhancement	(115,053)	-	(115,053)	Revenue Enhancement	(3,299,994)	-	(3,299,994)
Physician Billing Refunds	-	-	-	Physician Billing Refunds	(75,477)	-	(75,477)
Meaningful Use	-	182,281	(182,281)	Meaningful Use	2,609,005	1,611,129	997,876
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion -	-	-	-	Medicaid Expansion -	-	-	-
Capitation	67,708,802	49,342,140	18,366,662	Capitation	498,161,479	314,797,586	183,363,893
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion-	-	-	-	Medicaid Expansion-	-	-	-
Administrative Fees	6,309,844	2,128,414	4,181,430	Administrative Fees	21,917,622	6,385,242	15,532,380
PCIP	-	-	-	PCIP	43,915	-	43,915
Physician Contract	-	-	-	Physician Contract	-	-	-
Payments & Revenues	17,999	47,562	(29,563)	Payments & Revenues	440,348	420,385	19,963
Totals	\$ 93,064,123	\$ 68,834,654	\$ 24,229,469	Totals	\$ 704,375,270	\$ 483,355,309	\$ 221,019,961

	Actual	Budget	Variance		Actual	Budget	Variance
PHCC				PHCC			
Medicare	\$ 209,838	\$ 338,297	\$ (128,459)	Medicare	\$ 1,988,833	\$ 2,990,109	\$ (1,001,276)
Medicaid	401,697	626,336	(224,639)	Medicaid	7,408,662	6,106,776	1,301,886
Other	101,546	123,601	(22,055)	Other	2,311,082	1,092,474	1,218,608
Physician Billing	58,558	43,177	15,381	Physician Billing	483,758	391,058	92,700
Medicaid Retroactive Payment	-	-	-	Medicaid Retroactive Payment	562,445	-	562,445
UPL Medicaid Payment	-	-	-	UPL Medicaid Payment	-	-	-
Vendor Payments From Revenue	-	-	-	Vendor Payments From Revenue	-	-	-
Pharmacy Billing	(1,722)	-	(1,722)	Pharmacy Billing	(23,490)	-	(23,490)
Collection Agency	-	-	-	Collection Agency	(4,864)	-	(4,864)
Revenue Enhancement	-	-	-	Revenue Enhancement	-	-	-
Physician Billing Refunds	-	-	-	Physician Billing Refunds	-	-	-
Meaningful Use	-	26,040	(26,040)	Meaningful Use	617,106	230,160	386,946
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion -	-	-	-	Medicaid Expansion -	-	-	-
Capitation	-	-	-	Capitation	-	-	-
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion-	-	-	-	Medicaid Expansion-	-	-	-
Administrative Fees	-	-	-	Administrative Fees	-	-	-
PCIP	-	-	-	PCIP	-	-	-
Physician Contract	-	-	-	Physician Contract	-	-	-
Payments & Revenues	-	-	-	Payments & Revenues	-	-	-
Totals	\$ 769,917	\$ 1,157,451	\$ (387,534)	Totals	\$ 13,343,531	\$ 10,810,577	\$ 2,532,954

	Actual	Budget	Variance		Actual	Budget	Variance
OFHC				OFHC			
Medicare	\$ (170)	\$ -	\$ (170)	Medicare	\$ 68,852	\$ -	\$ 68,852
Medicaid	369,737	-	369,737	Medicaid	7,031,700	-	7,031,700
Other	14,802	-	14,802	Other	182,410	-	182,410
Physician Billing	38,968	12,050	26,918	Physician Billing	347,798	109,135	238,663
Medicaid Retroactive Payment	-	-	-	Medicaid Retroactive Payment	-	-	-
UPL Medicaid Payment	-	-	-	UPL Medicaid Payment	-	-	-
Vendor Payments From Revenue	-	-	-	Vendor Payments From Revenue	-	-	-
Pharmacy Billing	-	-	-	Pharmacy Billing	-	-	-
Collection Agency	-	-	-	Collection Agency	(551)	-	(551)
Revenue Enhancement	-	-	-	Revenue Enhancement	-	-	-
Physician Billing Refunds	-	-	-	Physician Billing Refunds	-	-	-
Meaningful Use	-	-	-	Meaningful Use	-	-	-
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion -	-	-	-	Medicaid Expansion -	-	-	-
Capitation	-	-	-	Capitation	-	-	-
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion-	-	-	-	Medicaid Expansion-	-	-	-
Administrative Fees	-	-	-	Administrative Fees	-	-	-
PCIP	-	-	-	PCIP	-	-	-
Physician Contract	-	-	-	Physician Contract	-	-	-
Payments & Revenues	-	-	-	Payments & Revenues	-	-	-
Totals	\$ 423,337	\$ 12,050	\$ 411,287	Totals	\$ 7,630,209	\$ 109,135	\$ 7,521,074

	Actual	Budget	Variance		Actual	Budget	Variance
SYSTEM				SYSTEM			
Medicare	\$ 7,377,789	\$ 5,369,794	\$ 2,007,995	Medicare	\$ 55,510,980	\$ 47,462,051	\$ 8,048,929
Medicaid	9,707,642	9,941,846	(234,204)	Medicaid	113,346,171	96,932,997	16,413,174
Other	2,453,461	1,961,918	491,543	Other	22,376,775	17,340,825	5,035,950
Physician Billing	803,127	1,004,160	(201,033)	Physician Billing	7,678,213	9,094,646	(1,416,433)
Medicaid Retroactive Payment	-	-	-	Medicaid Retroactive Payment	6,207,941	-	6,207,941
UPL Medicaid Payment	-	-	-	UPL Medicaid Payment	-	-	-
Vendor Payments From Revenue	-	-	-	Vendor Payments From Revenue	-	-	-
Pharmacy Billing	(1,722)	-	(1,722)	Pharmacy Billing	(23,490)	-	(23,490)
Collection Agency	(4,512)	-	(4,512)	Collection Agency	(161,583)	-	(161,583)
Revenue Enhancement	(115,053)	-	(115,053)	Revenue Enhancement	(3,299,994)	-	(3,299,994)
Physician Billing Refunds	-	-	-	Physician Billing Refunds	(75,477)	-	(75,477)
Physician Contract	-	-	-	Physician Contract	-	-	-
Payments & Revenues	17,999	47,562	(29,563)	Payments & Revenues	440,348	420,385	19,963
PCIP	-	-	-	PCIP	43,915	-	43,915
Meaningful Use	-	208,321	(208,321)	Meaningful Use	3,226,111	1,841,289	1,384,822
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion -	-	-	-	Medicaid Expansion -	-	-	-
Capitation	67,708,802	49,342,140	18,366,662	Capitation	498,161,479	314,797,586	183,363,893
CountyCare /	-	-	-	CountyCare /	-	-	-
Medicaid Expansion-	-	-	-	Medicaid Expansion-	-	-	-
Administrative Fees	6,309,844	2,128,414	4,181,430	Administrative Fees	21,917,622	6,385,242	15,532,380
DSH	13,528,186	12,125,000	1,403,186	DSH	121,753,674	109,125,000	12,628,674
Retro-Active DSH	-	-	-	Retro-Active DSH	-	-	-
BIPA	93,750,000	93,751,000	(1,000)	BIPA	63,750,000	63,751,000	(1,000)
Medicaid Malpractice Retro	-	-	-	Medicaid Malpractice Retro	-	-	-
Totals	\$ 201,535,563	\$ 175,880,155	\$ 25,655,408	Totals	\$ 910,852,685	\$ 667,151,021	\$ 243,701,664

The OFHC FFS budget has been combined with the SHCC FFS budget due to the configuration of CCHHS system that treats OFHC as a SHCC clinic.

Beginning March-2014, the capitation for the Medicaid Expansion program is paid at 100% instead of 50%.

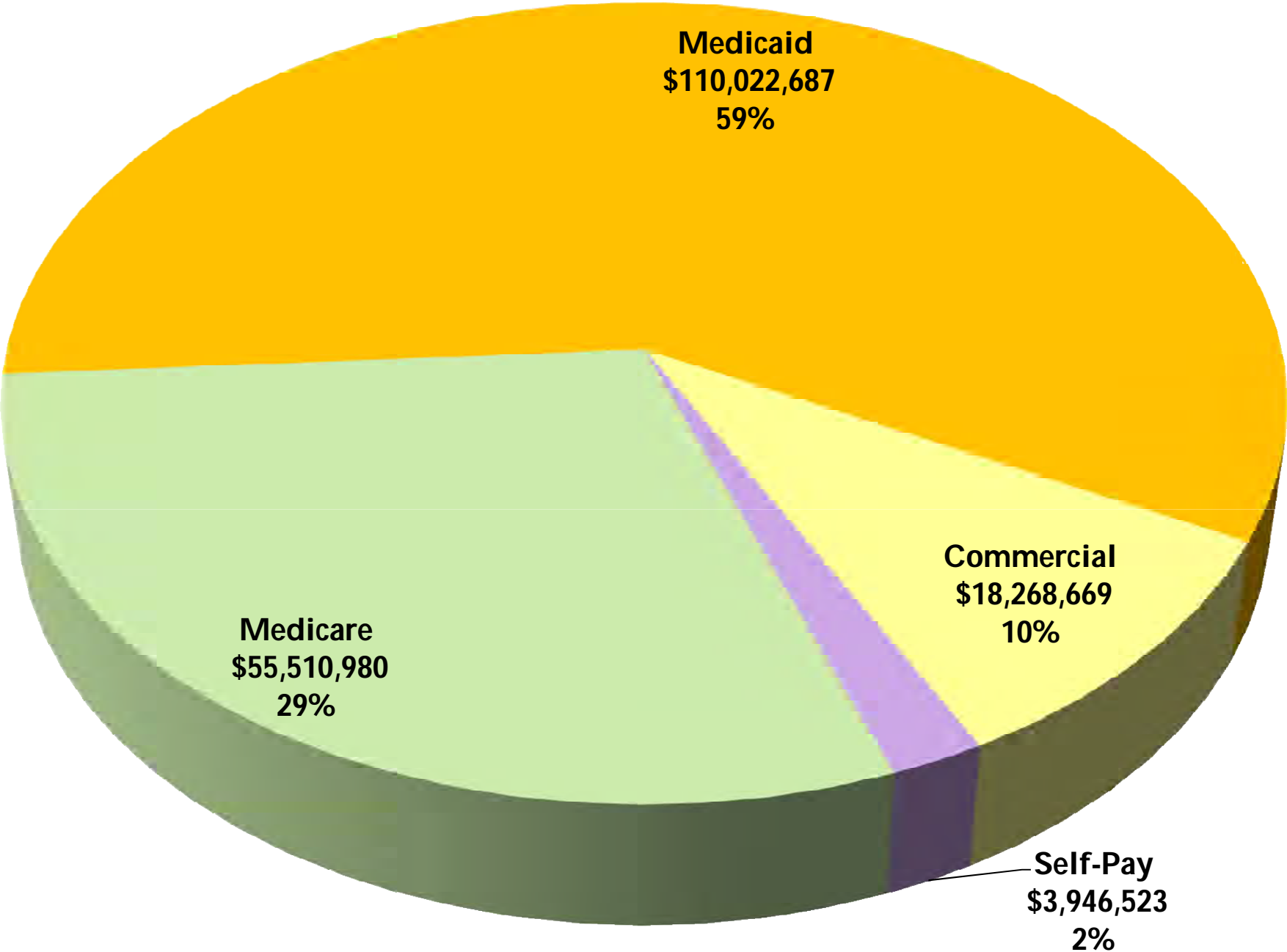
The Medicaid fee-for-service revenue through the IGT covers the period beginning week ended 07/23/2014 - 08/13/2014.

Vendor Payments From Revenue are payments out of revenue posted by the County Comptroller. Pharmacy Billing and Revenue Enhancement payments are reductions to Medicaid revenue. Collection Agency payments are reductions to Self-Pay (Other) revenue. Physician Billing payments include refunds processed by CCHHS. Included in the "Revenue Enhancement" totals are payments to the state for supplemental workers hired to help process CountyCare and MANG applications.

The Meaningful Use budget was spread over 12 months, as it was not known at the time the budget was created in which month this payment will be received. Meaningful Use includes both the Medicare and Medicaid portions. The Meaningful Use payment is detailed as follows:

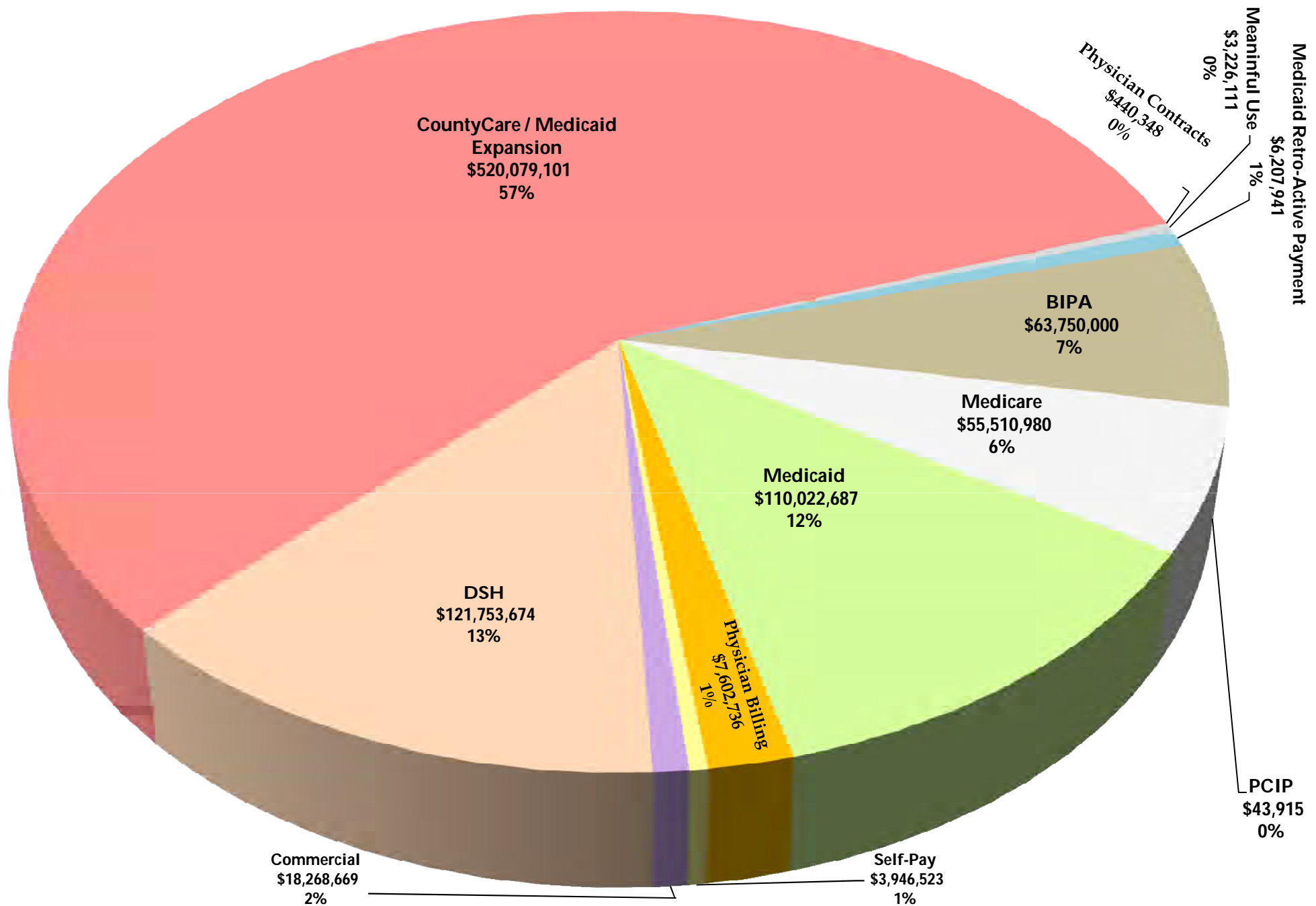
	Aug-14	FY 2014 Total
Meaningful Use - Medicare	\$ -	\$ 1,291,490
Meaningful Use - Medicaid	-	1,934,621
Meaningful Use - Total	\$ -	\$ 3,226,111

**CCHHS Cumulative Net Patient Fee Cash Receipts
Through August-2014**



- The receipts on this graph are net of any payments out of revenue.

CCHHS Cumulative Total Net Cash Receipts Through August-2014

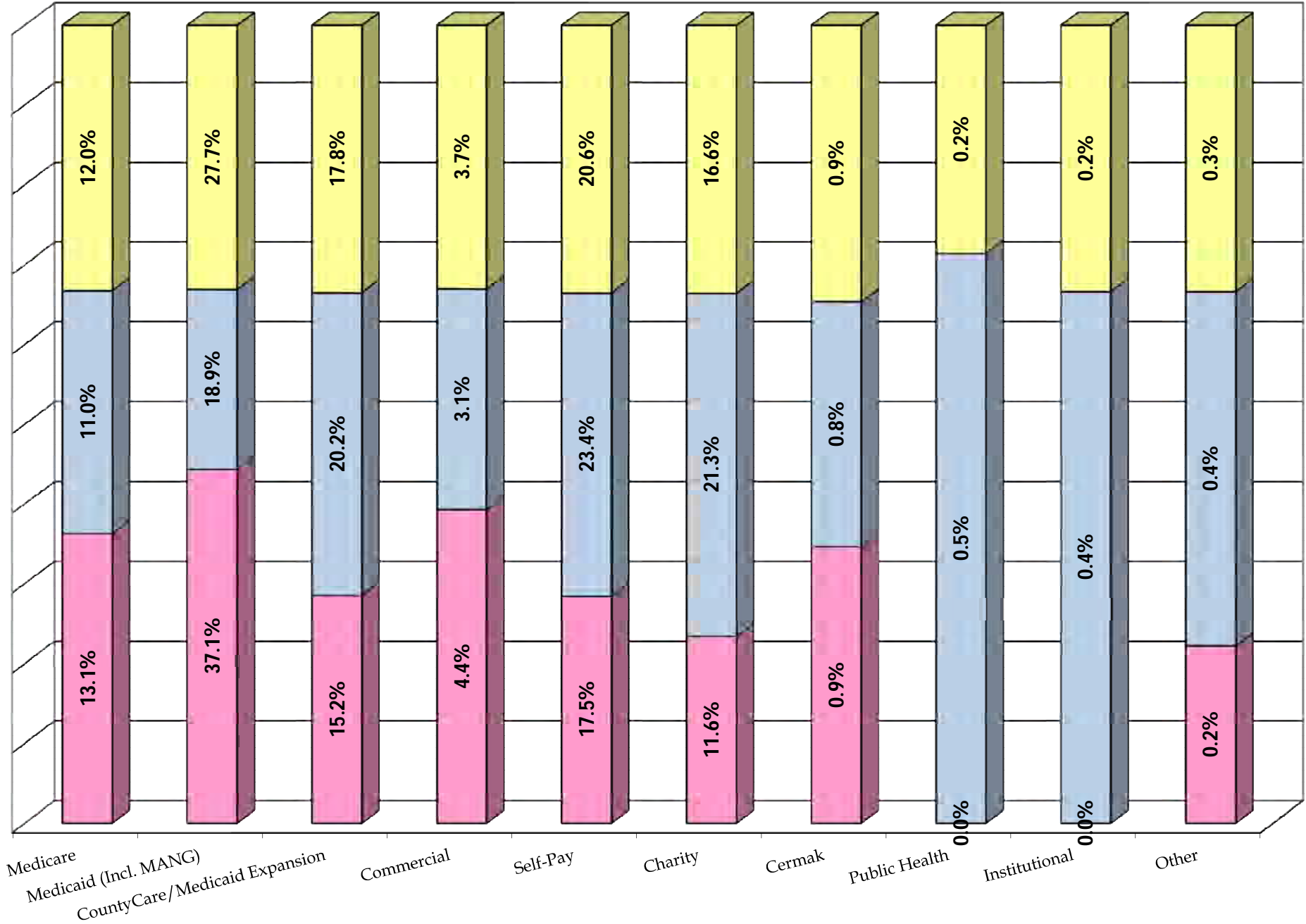


- The receipts on this graph are net of any payments out of revenue.
 - The graph does not reflect the \$30,000,000 repayment of the FY 2013 advance to the CountyCare/Medicaid Expansion program.

**Cook County Health Facilities
System Expenses per Adjusted Patient Days
Budget and Actual (Non-GAAP Budget Basis)
As of August 31, 2014**

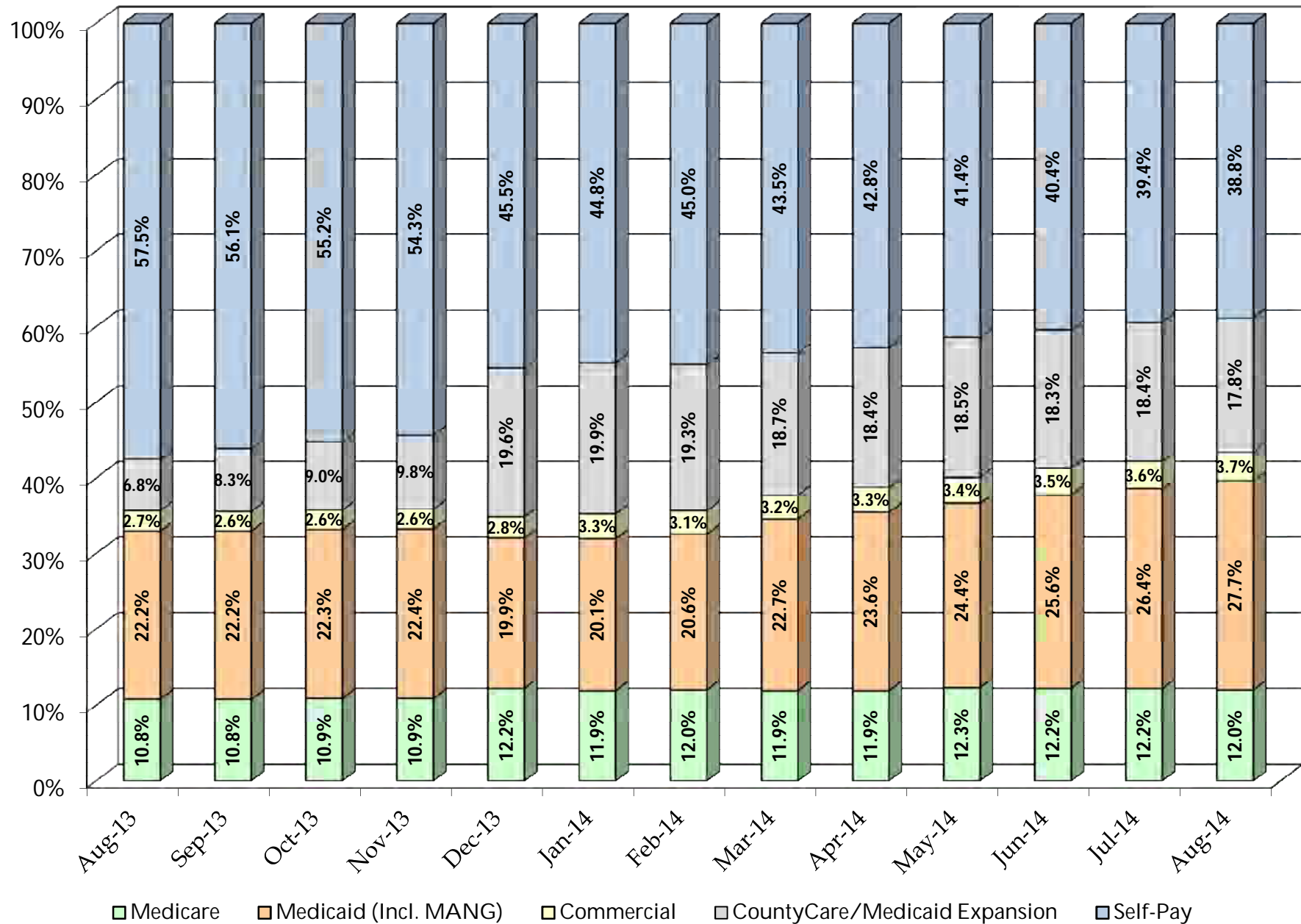
<u>Institution</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>
Stroger	\$ 6,391	\$ 5,797	-10.25%
Provident	\$ 4,017	\$ 3,852	-4.28%

**Cumulative CCHHS IP, OP, And Combined Payer Mix Through Aug-2014 (Based Upon Charges)
Assumes 30% Of Accounts Accepted By Eligibility Vendor Successfully Converted To Medicaid**



- The data in this graph is based upon charges in the month of August 2014.
- Other includes Grants, Risk Management, and Workman's Compensation.

IP And OP Cumulative Combined Payer Mix Comparison (Based Upon Charges)
Cook County Health And Hospitals System
Prior 13 Months Ending Aug-2014
Assumes 30% of Accounts Accepted By Eligibility Vendor Successfully Converted To Medicaid



CCHHS Utilization Factors
Assumes 30% of Accounts Accepted by Eligibility Vendor Successfully Converted to Medicaid
August-2014

Admissions

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	239	231	8	17	20	(3)	256	251	5
Medicaid	587	361	226	38	20	18	625	381	244
Medicaid-Pending	2	-	2	-	-	-	2	-	2
CountyCare/Medicaid Expansion	232	254	(22)	24	29	(5)	256	283	(27)
Commercial	60	44	16	4	4	-	64	48	16
Self-Pay	496	1,142	(646)	14	52	(38)	510	1,194	(684)
Charity	256	-	256	2	-	2	258	-	258
Cermak	22	-	22	-	-	-	22	-	22
Grants	1	-	1	-	-	-	1	-	1
Institutional	-	-	-	-	-	-	-	-	-
Public Health	-	-	-	-	-	-	-	-	-
Workmens' Compensation	-	-	-	-	-	-	-	-	-
Total Admissions	1,895	2,032	(137)	99	125	(26)	1,994	2,157	(163)

Patient Days

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	1,066	1,015	51	66	93	(27)	1,132	1,108	24
Medicaid	2,936	1,667	1,269	139	84	55	3,075	1,751	1,324
Medicaid-Pending	7	-	7	-	-	-	7	-	7
CountyCare/Medicaid Expansion	956	1,006	(50)	121	96	25	1,077	1,102	(25)
Commercial	286	260	26	10	11	(1)	296	271	25
Self-Pay	2,049	5,538	(3,489)	52	198	(146)	2,101	5,736	(3,635)
Charity	1,100	-	1,100	11	-	11	1,111	-	1,111
Cermak	95	-	95	-	-	-	95	-	95
Grants	4	-	4	-	-	-	4	-	4
Institutional	-	-	-	-	-	-	-	-	-
Public Health	-	-	-	-	-	-	-	-	-
Workmens' Compensation	-	-	-	-	-	-	-	-	-
Total Patient Days	8,499	9,486	(987)	399	482	(83)	8,898	9,968	(1,070)

Adjusted Patient Days

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	2,128	1,978	150	276	345	(69)	2,404	2,323	81
Medicaid	5,859	3,247	2,612	581	312	269	6,440	3,559	2,881
Medicaid-Pending	14	-	14	-	-	-	14	-	14
CountyCare/Medicaid Expansion	1,908	1,961	(53)	505	356	149	2,413	2,317	96
Commercial	571	507	64	42	41	1	613	548	65
Self-Pay	4,090	10,791	(6,701)	217	736	(519)	4,307	11,527	(7,220)
Charity	2,196	-	2,196	46	-	46	2,242	-	2,242
Cermak	190	-	190	-	-	-	190	-	190
Grants	8	-	8	-	-	-	8	-	8
Institutional	-	-	-	-	-	-	-	-	-
Public Health	-	-	-	-	-	-	-	-	-
Workmens' Compensation	-	-	-	-	-	-	-	-	-
Total Adjusted Patient Days	16,964	18,484	(1,520)	1,667	1,790	(123)	18,631	20,274	(1,643)

Average Length of Stay

Payer Type	Stroger Hospital			Provident Hospital		
	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	4.5	4.7	(0.2)	4.5	4.0	0.5
Medicaid	5.4	4.7	0.7	3.6	4.0	(0.4)
Medicaid-Pending	4.6	4.7	(0.1)	-	-	-
CountyCare/Medicaid Expansion	4.4	4.7	(0.3)	4.0	4.0	-
Commercial	4.1	4.7	(0.6)	2.4	4.0	(1.6)
Self-Pay	3.8	4.7	(0.9)	3.5	4.0	(0.5)
Charity	4.1	4.7	(0.6)	4.0	4.0	-
Grants	4.0	4.7	(0.7)	-	-	-
Cermak	2.8	4.7	(1.9)	-	-	-
Institutional	-	-	-	-	-	-
Public Health	-	-	-	-	-	-
Workmens' Compensation	-	-	-	-	-	-
Overall Average LOS	4.5	4.7	(0.2)	3.8	4.0	(0.2)

CCHHS Utilization Factors
Assumes 30% of Accounts Accepted by Eligibility Vendor Successfully Converted to Medicaid
Cumulative For Fiscal Year 2013 Through August-2014

Admissions

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	2,068	2,197	(129)	180	148	32	2,248	2,345	(97)
Medicaid	3,647	4,651	(1,004)	180	197	(17)	3,827	4,848	(1,021)
Medicaid-Pending	305	-	305	7	-	7	312	-	312
CountyCare/Medicaid Expansion	1,976	1,908	68	228	255	(27)	2,204	2,163	41
Commercial	437	387	50	35	24	11	472	411	61
Self-Pay	5,198	8,573	(3,375)	287	468	(181)	5,485	9,041	(3,556)
Charity	1,838	-	1,838	39	-	39	1,877	-	1,877
Cermak	195	-	195	1	-	1	196	-	196
Grants	2	-	2	-	-	-	2	-	2
Institutional	2	-	2	-	-	-	2	-	2
Public Health	1	-	1	1	-	1	2	-	2
Workmens' Compensation	7	-	7	-	-	-	7	-	7
Total Admissions	15,676	17,716	(2,040)	958	1,092	(134)	16,634	18,808	(2,174)

Patient Days

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	10,195	9,705	490	741	638	103	10,936	10,343	593
Medicaid	19,211	22,947	(3,736)	695	826	(131)	19,906	23,773	(3,867)
Medicaid-Pending	2,052	-	2,052	34	-	34	2,086	-	2,086
CountyCare/Medicaid Expansion	8,569	7,827	742	940	986	(46)	9,509	8,813	696
Commercial	2,527	2,265	262	116	77	39	2,643	2,342	301
Self-Pay	25,281	40,331	(15,050)	1,131	1,789	(658)	26,412	42,120	(15,708)
Charity	7,570	-	7,570	111	-	111	7,681	-	7,681
Cermak	957	-	957	2	-	2	959	-	959
Grants	5	-	5	-	-	-	5	-	5
Institutional	13	-	13	-	-	-	13	-	13
Public Health	4	-	4	2	-	2	6	-	6
Workmens' Compensation	63	-	63	-	-	-	63	-	63
Total Patient Days	76,447	83,075	(6,628)	3,772	4,316	(544)	80,219	87,391	(7,172)

Adjusted Patient Days

Payer Type	Stroger Hospital			Provident Hospital			System Total		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
Medicare	20,553	18,785	1,768	3,027	2,170	857	23,580	20,955	2,625
Medicaid	38,674	44,202	(5,528)	2,860	2,769	91	41,534	46,971	(5,437)
Medicaid-Pending	4,152	-	4,152	136	-	136	4,288	-	4,288
CountyCare/Medicaid Expansion	17,262	15,135	2,127	3,849	3,288	561	21,111	18,423	2,688
Commercial	5,093	4,390	703	475	263	212	5,568	4,653	915
Self-Pay	50,993	78,108	(27,115)	4,598	6,044	(1,446)	55,591	84,152	(28,561)
Charity	15,250	-	15,250	452	-	452	15,702	-	15,702
Cermak	1,931	-	1,931	8	-	8	1,939	-	1,939
Grants	10	-	10	-	-	-	10	-	10
Institutional	26	-	26	-	-	-	26	-	26
Public Health	8	-	8	8	-	8	16	-	16
Workmens' Compensation	126	-	126	-	-	-	126	-	126
Total Adjusted Patient Days	154,078	160,620	(6,542)	15,413	14,534	879	169,491	175,154	(5,663)

CCHHS Utilization Factors

**Assumes 30% of Accounts Accepted by Eligibility Vendor Successfully Converted to Medicaid
Emergency Room And Immediate Care Visits For August-2014**

Stroger Hospital

Payer Type	ER Patients	Total Visits		Total Visits	
	Treated And Released	Admissions From ER	Before Elopes	ER Elopes	& Elopes
Medicare	554	189	743	24	767
Medicaid	2,062	417	2,479	100	2,579
Medicaid-Pending	3	1	4	1	5
CountyCare/Medicaid Expansion	1,297	162	1,459	83	1,542
Commercial	341	47	388	6	394
Self-Pay	3,216	393	3,609	228	3,837
Charity	856	173	1,029	51	1,080
Cermak	53	20	73	-	73
Grants & Research	7	1	8	2	10
Public Health	6	-	6	1	7
Institutional	16	-	16	-	16
Workmens' Compensation	3	-	3	-	3
Totals	8,414	1,403	9,817	496	10,313
		Budget	10,169		
		Variance	(352)		

Provident Hospital

Payer Type	Treated And Released	Admissions From ER	Visits Before Elopes	ER Elopes	Total Visits & Elopes
Medicare	206	16	222	9	231
Medicaid	665	36	701	31	732
Medicaid-Pending	-	-	-	-	-
CountyCare/Medicaid Expansion	490	22	512	20	532
Commercial	102	4	106	5	111
Self-Pay	827	12	839	50	889
Charity	81	2	83	2	85
Cermak	-	-	-	-	-
Grants & Research	1	-	1	-	1
Public Health	4	-	4	-	4
Institutional	4	-	4	1	5
Workmens' Compensation	2	-	2	-	2
Totals	2,382	92	2,474	118	2,592
		Budget	2,802		
		Variance	(328)		

Oak Forest Health Center

Payer Type	Immediate Care Visits
Medicare	76
Medicaid	179
Medicaid-Pending	-
CountyCare/Medicaid Expansion	316
Commercial	45
Self-Pay	441
Charity	103
Cermak	-
Grants & Research	-
Public Health	-
Institutional	-
Workmens' Compensation	-
Totals	1,160
	Budget 1,367
	Variance (207)

ER and Immediate Care Total

Payer Type	ER Patients Treated And Released	Admissions From ER	Immediate Care Visits	Total Visits Before Elopes	ER Elopes	Total ER and Immediate Care Visits with Elopes
Medicare	760	205	76	1,041	33	1,074
Medicaid	2,727	453	179	3,359	131	3,490
Medicaid-Pending	3	1	-	4	1	5
CountyCare/Medicaid Expansion	1,787	184	316	2,287	103	2,390
Commercial	443	51	45	539	11	550
Self-Pay	4,043	405	441	4,889	278	5,167
Charity	937	175	103	1,215	53	1,268
Cermak	53	20	-	73	-	73
Grants & Research	8	1	-	9	2	11
Public Health	10	-	-	10	1	11
Institutional	20	-	-	20	1	21
Workmens' Compensation	5	-	-	5	-	5
Totals	10,796	1,495	1,160	13,451	614	14,065
			ER and Immediate Care Budget	14,338		
			Variance	(887)		

Percent Of Admissions From Emergency Room For Month Of August-2014

	SHCC	PHCC	CCHHS
ER Admissions	1,403	92	1,495
Total Admissions	1,895	99	1,994
% of ER Admissions	74%	93%	75%

Emergency Room Elope Percentage For Month Of August-2014

	SHCC	PHCC	CCHHS
ER Elopes	496	118	614
Total Visits with Elopes	10,313	2,592	12,905
% of ER Elopes	5%	5%	5%

(This data does not include Immediate Care Visits. It includes ER data only.)

Notes:

- ER Elopes are patients who leave without being seen by a physician.
- "Medicaid-Pending" assumes 30% of the Self-Pay accounts accepted by the eligibility vendor will be successfully converted to Medicaid accounts.
- The "Payer Type" represents the financial class in which the patient presented to CCHHS; it is not necessarily the final financial class for the patient, especially for Self-Pay patients.

CCHHS Utilization Factors

**Assumes 30% of Accounts Accepted by Eligibility Vendor Successfully Converted to Medicaid
Cumulative Emergency Room And Immediate Care Visits Through August-2014**

Stroger Hospital

Payer Type	ER Patients Treated And Released	Admissions From ER	Total Visits Before Elopes	ER Elopes	Total Visits & Elopes
Medicare	4,768	1,686	6,454	328	6,782
Medicaid	13,926	2,327	16,253	978	17,231
Medicaid-Pending	172	217	389	32	421
CountyCare/Medicaid Expansion	12,327	1,435	13,762	742	14,504
Commercial	2,261	312	2,573	87	2,660
Self-Pay	33,115	3,737	36,852	2,935	39,787
Charity	7,596	1,295	8,891	369	9,260
Cermak	580	172	752	9	761
Grants & Research	46	2	48	12	60
Public Health	72	-	72	24	96
Institutional	104	2	106	9	115
Workmens' Compensation	34	7	41	2	43
Totals	75,001	11,192	86,193	5,527	91,720
		Budget	91,177		
		Variance	(4,984)		

Provident Hospital

Payer Type	Treated And Released	Admissions From ER	Visits Before Elopes	ER Elopes	Total Visits & Elopes
Medicare	1,553	169	1,722	109	1,831
Medicaid	4,161	166	4,327	355	4,682
Medicaid-Pending	15	6	21	3	24
CountyCare/Medicaid Expansion	4,578	212	4,790	291	5,081
Commercial	751	34	785	43	828
Self-Pay	9,389	258	9,647	880	10,527
Charity	826	30	856	55	911
Cermak	13	-	13	1	14
Grants & Research	12	-	12	-	12
Public Health	40	1	41	5	46
Institutional	22	-	22	8	30
Workmens' Compensation	4	-	4	-	4
Totals	21,364	876	22,240	1,750	23,990
		Budget	23,816		
		Variance	(1,576)		

Oak Forest Health Center

Payer Type	Immediate Care Visits
Medicare	558
Medicaid	1,078
Medicaid-Pending	4
CountyCare/Medicaid Expansion	2,574
Commercial	289
Self-Pay	5,061
Charity	1,007
Cermak	1
Grants & Research	-
Public Health	1
Institutional	1
Workmens' Compensation	3
Totals	10,577
	Budget 11,622
	Variance (1,045)

ER and Immediate Care Total

Payer Type	ER Patients Treated And Released	Admissions From ER	Immediate Care Visits	Total Visits Before Elopes	ER Elopes	Total ER and Immediate Care Visits with Elopes
Medicare	6,321	1,855	558	8,734	437	9,171
Medicaid	18,087	2,493	1,078	21,658	1,333	22,991
Medicaid-Pending	187	223	4	414	35	449
CountyCare/Medicaid Expansion	16,905	1,647	2,574	21,126	1,033	22,159
Commercial	3,012	346	289	3,647	130	3,777
Self-Pay	42,504	3,995	5,061	51,560	3,815	55,375
Charity	8,422	1,325	1,007	10,754	424	11,178
Cermak	593	172	1	766	10	776
Grants & Research	58	2	-	60	12	72
Public Health	112	1	1	114	29	143
Institutional	126	2	1	129	17	146
Workmens' Compensation	38	7	3	48	2	50
Totals	96,365	12,068	10,577	119,010	7,277	126,287
			ER and Immediate Care Budget	126,615		
			Variance	(7,605)		

Cumulative Percent Of Admissions From Emergency Room Through August-2014

	SHCC	PHCC	CCHHS
ER Admissions	11,192	876	12,068
Total Admissions	15,676	958	16,634
% of ER Admissions	71%	91%	73%

Cumulative Emergency Room Elope Percentage Through August-2014

	SHCC	PHCC	CCHHS
ER Elopes	5,527	1,750	7,277
Total Visits with Elopes	91,720	23,990	115,710
% of ER Elopes	6%	7%	6%

(This data does not include Immediate Care Visits. It includes ER data only.)

Notes:

- ER Elopes are patients who leave without being seen by a physician.
- "Medicaid-Pending" assumes 30% of the Self-Pay accounts accepted by the eligibility vendor will be successfully converted to Medicaid accounts.
- The "Payer Type" represents the financial class in which the patient presented to CCHHS; it is not necessarily the final financial class for the patient, especially for Self-Pay patients.

**CCHHS Utilization Factors
ACHN Clinic Visits - August-2014**

ACHN Clinic Visits - August-2014

	Actual	Budget	Variance
FANTUS / STROGER SCC CAMPUS	30,601	33,313	(2,712)
WEST CLUSTER	5,053	5,654	(601)
SOUTH CLUSTER	5,155	5,850	(695)
SOUTH SUBURBAN CLUSTER	4,912	6,031	(1,119)
Total ACHN Visits	45,721	50,848	(5,127)

Cumulative ACHN Clinic Visits Through August-2014

	Actual	Budget	Variance
FANTUS / STROGER SCC CAMPUS	281,562	290,711	(9,149)
WEST CLUSTER	44,134	49,354	(5,220)
SOUTH CLUSTER	48,219	53,255	(5,036)
SOUTH SUBURBAN CLUSTER	45,967	51,402	(5,435)
Total ACHN Visits	419,882	444,722	(24,840)

**Cook County Health and Hospitals System
Top Ten DRG's - August-2014**

John H. Stroger, Jr. Hospital of Cook County

Rank	DRG and Description	Total Patients	Total Days	Avg LOS	Case Mix	MEDICARE Geometric Avg LOS
1	392 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	56	125	2.2	0.7395	2.9
2	812 RED BLOOD CELL DISORDERS W/O MCC	45	122	2.7	0.7985	2.6
3	603 CELLULITIS W/O MCC	44	103	2.3	0.8402	3.6
4	313 CHEST PAIN	42	58	1.4	0.5992	1.8
5	292 HEART FAILURE & SHOCK W CC	36	119	3.3	0.9938	3.7
6	690 KIDNEY & URINARY TRACT INFECTIONS W/O MCC	36	88	2.4	0.7693	3.2
7	775 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	30	119	4.0	0.5625	2.1
8	743 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC/MCC	29	62	2.1	0.9903	1.7
9	847 CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W CC	27	133	4.9	1.1062	3.0
10	794 NEONATE W OTHER SIGNIFICANT PROBLEMS	25	100	4.0	1.2494	3.4

Provident Hospital of Cook County

Rank	DRG and Description	Total Patients	Total Days	Avg LOS	Case Mix	MEDICARE Geometric Avg LOS
1	313 CHEST PAIN	29	83	2.9	0.5992	1.8
2	292 HEART FAILURE & SHOCK W CC	13	74	5.7	0.9938	3.7
3	293 HEART FAILURE & SHOCK W/O CC/MCC	5	19	3.8	0.6723	2.6
4	291 HEART FAILURE & SHOCK W MCC	3	16	5.3	1.5031	4.6
5	977 HIV W OR W/O OTHER RELATED CONDITION	3	7	2.3	1.1194	3.6
6	603 CELLULITIS W/O MCC	3	26	8.7	0.8402	3.6
7	312 SYNCOPE & COLLAPSE	3	7	2.3	0.7228	2.4
8	192 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	3	13	4.3	0.7120	2.8
9	149 DYSEQUILIBRIUM	3	3	1.0	0.6184	2.1
10	494 LOWER EXTREM & HUMER PROC EXCEPT HIP, FOOT, FEMUR W/O CC/MCC	2	4	2.0	1.5073	2.7